







OBSERVATIONS  
ON THOSE  
**DISEASES OF FEMALES**  
WHICH ARE  
ATTENDED BY DISCHARGES.

DISSEMINATION OF  
DISEASES OF REMAINS  
AND THE  
ATTENDED BY DISCHARGES

LONDON:  
Printed by A. & R. Spottiswoode,  
New-Street-Square.



OBSERVATIONS  
ON THOSE  
DISEASES OF FEMALES  
WHICH ARE  
ATTENDED BY DISCHARGES.

ILLUSTRATED BY  
COPPER-PLATES OF THE DISEASES.

---

BY  
CHARLES MANSFIELD CLARKE, M.D. F.R.S.  
MEMBER OF THE ROYAL COLLEGE OF PHYSICIANS, LONDON,  
AND PHYSICIAN IN ORDINARY TO THE QUEEN.

---

PART II.

---

Helleborum frustra, cum jam cutis ægra tumebit,  
Poscentes videas ; venienti occurrite morbo.      PERS. 3 Sat.

---

THIRD EDITION.

---

LONDON:  
PRINTED FOR  
LONGMAN, REES, ORME, BROWN, AND GREEN,  
PATERNOSTER-ROW.

1831.

d

OBSERVATIONS

ON

DISEASES OF FEMALES

BY

ATTENDED BY DISCHARGES

OF THE

CONTENTS OF THE

16603

CHAMBERLAIN'S

OF THE

OF THE



PART II

OF THE

OF THE

LONDON

OF THE

OF THE

OF THE

OF THE



TO  
THOSE GENTLEMEN  
WHO HAVE HONOURED THE AUTHOR BY THEIR ATTENDANCE  
UPON HIS LECTURES  
DURING THE LAST SEVENTEEN YEARS,  
*THIS SECOND PART*  
OF HIS WORK, UPON CERTAIN DISEASES OF FEMALES,  
IS DEDICATED,  
AS A SMALL, BUT SINCERE, TRIBUTE  
OF REGARD AND ESTEEM,  
BY  
THEIR VERY FAITHFUL FRIEND  
AND SERVANT,  
CHARLES MANSFIELD CLARKE.

SAVILE ROW,  
April 2. 1831.





## CONTENTS.

---

	Page
<i>Introductory Remarks</i> - - -	1
CHAP. I. <i>White Mucous Discharge</i> -	5
<i>Inflammation of the Cervix Uteri</i>	
5 et seq.	
<i>Inflammation of the Substance of</i>	
<i>the unimpregnated Uterus</i> -	28
<i>Remarks upon Amenorrhœa</i> -	33
II. <i>Watery Discharge</i> - - -	55
<i>Cauliflower Excrecence of the</i>	
<i>Os Uteri</i> - - -	57
<i>Symptoms of Cauliflower Ex-</i>	
<i>crecence</i> - - -	83
<i>Treatment of Cauliflower Ex-</i>	
<i>crecence</i> - - -	91
<i>Hydatids of the Uterus</i> - -	116
<i>Oozing Tumour of the Labium</i>	129
<i>Involuntary Discharges of</i>	
<i>Urine</i> - - -	139

	Page
CHAP. III. <i>Purulent Discharge</i> - -	147
<i>Inflammation of the Mucous</i>	
<i>Membrane of the Uterus, ter-</i>	
<i>minating in Secretion of Pus</i>	153
<i>Inflammation of the Mucous</i>	
<i>Membrane of the Vagina</i> -	166
<i>Abscess of the Vagina</i> - -	177
<i>Ulceration of the Os Uteri and</i>	
<i>Cervix Uteri</i> - - -	185
<i>Corroding Ulcer of the Os Uteri</i>	187
<i>Symptoms of Corroding Ulcer</i>	192
<i>Treatment of Corroding Ulcer</i>	196
<i>Ulcerated- Carcinoma of the</i>	
<i>Rectum</i> - - - -	204
<i>Ulcerated Carcinoma of the</i>	
<i>Uterus</i> - - - -	213
<i>Treatment of Ulcerated Car-</i>	
<i>cinoma</i> - - - -	221
<i>Explanation of the Plates</i> - - -	241



# OBSERVATIONS,

&c.

---

## INTRODUCTORY REMARKS.

IMPRESSED with a belief that the diseases affecting the female organs of generation were not generally known to practitioners, and that they were consequently imperfectly understood; and flattered by the hope that some advantage might be derived from an attempt to classify them, and to describe them more fully, the author was led some years since to offer to the profession the former part of this work, comprehending such a division of the subject as appeared to be likely to place it in a clearer point of view than any which had been before attempted. The profession having been pleased to receive the under-

taking favourably, and to overlook its errors in consideration of the good intention with which it was composed, the author now produces this Second Part of his work.

In the first volume many diseases were treated of, which, from their frequent occurrence, were familiar to practitioners; whilst others were described, which more rarely take place, and to remedy which no mode of treatment had been suggested.

The vascular tumour, or excrescence, of the meatus urinarius, is an example of a disease most distressing to the patient, passing wholly without notice by writers on this branch of surgery. The symptoms of this malady being now known, and the practitioner put upon his guard respecting it, the disease may be easily ascertained, and readily removed. Many cases of this disease have come to the knowledge of the author, since the publication of this work, in which the mode of treatment which he recommended has been carried into effect by other practitioners, and the patient thereby cured.



In the present volume it is intended to enter into the consideration of a number of diseases, which have hitherto been little distinguished from each other, and which have been treated with little regard to any principles. It is to be lamented that many of them proceed invariably to a fatal termination ; but, whether this progress is to be accelerated or retarded, depends upon the knowledge of the practitioner. The situation of the patient is still more to be deplored, because many of these complaints are attended by great pain ; but whether that termination is to be hastened or postponed, whether that pain is to be aggravated or subdued, whether the patient is to be allowed to expire in torture, or to slide into eternity with moderated suffering, will be determined by the information of the medical attendant, and by his acquaintance with those means of diminishing the physical ills of humanity with which Providence has been pleased to bless the practitioners of the healing art.

## CHAPTER I.

THE author has comprehended all the discharges from the vagina under the following heads : —

1. Transparent mucous discharge.
2. White mucous discharge.
3. Watery discharge.
4. Purulent discharge.
5. Sanguineous discharge.

The first of these, Transparent Mucous Discharge, has already fallen under consideration. It has been seen that it accompanies a variety of morbid states, and that it forms a leading symptom of many, — that in itself it becomes, although unattended by any change of structure, or alteration of the relative situation of parts, a very important disease.

THE os externum is an opening out of which all discharges from the vagina must flow ; but their sources are as various as their peculiarities of appearance.

The next variety which will be here described is the

## WHITE MUCOUS DISCHARGE.

“ This discharge is opaque, of a perfectly white colour ; it resembles in consistence a mixture of starch and water made without heat, or thin cream : it is easily washed from the finger after an examination ; and it is capable of being diffused through water, rendering it turbid.” \*

The discharge, of which the above definition is given, belongs to one morbid condition of the uterus only ; but it characterises that condition with marked constancy.

\* Vide Vol. I.



“ A morbid state of the glands of the cervix of the uterus probably gives rise to this discharge ; at least the cases in which it comes away are those in which the symptoms are referred to this part ; and when pressure is made upon it, the woman complains of considerable pain.” \*

Upon a reference to the above definition, it will be seen that the discharge is easily washed from the finger after an examination, and that it is capable of being diffused through water, rendering it turbid. To all these circumstances attention must be paid. The investigation of the discharge must be made when the patient has remained quiet for some time, in order to draw a just conclusion from the appearances ; for it is to be observed, that even the *transparent* mucus of the vagina, when secreted in sufficient quantity to run down over the labia, (which have some motion upon each other in the act of walking,) becomes also opaque and white. This change is attributable to the entanglement of air with the

\* Vide Vol. I.

mucus. A similar circumstance may be observed in the angles of the mouth of hasty speakers, from the saliva entangling small bubbles of air. These have the appearance of whiteness; but if suffered to remain at rest, the air will be disengaged, and the saliva will regain its transparency. Such a mixture of mucus and air will not render the water turbid with which it may be combined; and this forms a distinguishing mark between it and the white mucous discharge which stands at the head of this chapter.

In many instances, the white mucous discharge is much thicker than cream, having the tenacity of glue; and, perhaps, this is the state in which it comes away from the cervix uteri. This appearance corresponds with that of the mucus which is separated from the cervix uteri at the commencement of labour. When the white opaque mucus possesses the tenacity just mentioned, it does not flow spontaneously, but it remains in the vagina, either until the exertions employed to empty the rec-

tum squeeze out, at the same time, the contents of the vagina; or, perhaps, by remaining in the vagina, it may, by mixing with the mucus of that part, become attenuated.

The white mucous discharge is never met with in large quantity; as might be expected, on considering the small surface of the part by which it is poured out. In women of strong passions, there is reason to believe that the white mucous discharge is always mixed in greater or less quantity with the mucus of the vagina; because in such women, when they are led to consult medical men, on account of profuse secretion from these parts, (to which they are very liable,) it will be found that the discharges have a milky hue. It is probable, that in many cases, where the white milky discharge is present, no symptoms are produced which call for remedy, the discharge, eventually relieving the increased action of the vessels which produced it, spontaneously ceasing; but, in all cases it is desirable to know the precise nature of



the secretion, which, being sometimes mistaken for pus, both the practitioner and the patient have been led to fear that some formidable disease has existed. Women are the most liable to the white opaque discharge between the age of twenty and the period at which the menses cease. How far it may be a forerunner of important disease in the cervix of the uterus, the author is not prepared to say, partly from the few occasions on which women are inclined to mention the early stages of disease in these organs; and partly, perhaps, from a blameable omission on his own part to take notes of such cases, so as to enable him to speak with confidence; but, reasoning upon the subject, and knowing the fact, that the discharges generally from these organs are found to be increased at the commencement of such complaints, it is not an improbable conjecture, that this secretion from the glands of the cervix of the uterus constitutes an important feature of them, especially as it is the *cervix* of the uterus which is the seat of *carcinoma*. In the greater number of cases of white mu-

cous discharge, few symptoms are produced; but this is not always the case; the patient being attacked by an uneasy sensation in the back and lowest part of the abdomen, which gradually becomes converted into pain. The pain is increased by whatever tends to call the neighbouring parts into action, such as riding; or by whatever produces pressure upon the part affected. In this way the passage of a hard and large portion of fæces causes much distress; for, not only are the blood-vessels filled in the act of expulsion; but, during the evacuation, constant, and sometimes considerable, pressure is made upon the cervix of the uterus; and if the evacuation be examined afterwards, a quantity of the white mucus will be found clinging to it, which the patient, unless she be very attentive, is apt to consider has passed from the bowels; but in very many cases, when care has been taken to ascertain this fact, it has been demonstrated that no part of such mucus has escaped from the anus. Irritation about the rectum is occasionally an attendant

upon the complaint, but not so frequently as irritability of the bladder. The close connection between the neck of the bladder and the neck of the uterus will account for this, independently of the sympathy which is known to exist between these parts. The desire to make water frequently, it must be observed, is also an attendant upon the early stages of pregnancy; in which state the glands of the cervix of the uterus undergo a change of action, and the symptom ceases so soon as this part becomes quiet again; that is to say, at the end of the eighth or tenth week, at which time the cervix of the uterus is perfectly blocked up, the quantity of the gelatinous mucus not increasing after that period.

The constitution is rarely affected in this complaint, the action of the heart and arteries is not increased, and the functions of health are seldom interrupted.

The menstruation is seldom affected, but it proceeds as it was accustomed to do in such persons. In some instances painful



menstruation has been present. Where an examination per vaginam has been made, the external parts and the canal of the vagina have not possessed a more than ordinary degree of sensibility, but, upon the finger reaching the cervix uteri, the patient has complained of pain, and the uneasiness has been compared to that which has been experienced upon the passage of an evacuation from the rectum ; pressure in both cases being the cause of the pain. There is, however, no alteration of structure in the part ; no thickening, no peculiar enlargement of the os uteri, no breach of surface ; the portion of the vagina which is reflected over the cervix uteri possessing its usual polished and smooth state.

Several cases had occurred to the writer, attended by the symptoms above mentioned, before he ascertained the nature of the disease ; but, he has now no hesitation in stating, that, wherever the white mucous discharge is present, there will be found, on examination, a tenderness of the cervix of the uterus, which will be removed or re-

lieved by the mode of treatment hereafter to be mentioned. It deserves to be remarked, however, that some cases resist all treatment, continuing until at length they appear to wear themselves out ; and during their continuance, in many cases, impregnation is prevented.

A lady, about twenty-five years of age, who had been married two or three years, but who had never fallen with child, complained of a considerable degree of uneasiness at the extremity of the back, near the os cœccygis ; on this account she indulged much in the horizontal posture. She had also been liable for some years to a discharge from the vagina, which, on investigation, was ascertained to put on a white appearance : the general health was tolerably good, excepting that at the periods of menstruation great pain was felt at the bottom of the belly, which lasted for twenty-four hours, during which time the menstruous discharge did not flow freely, being pale in colour, and occasionally mixed with portions of a stringy substance. On account

of the discharge, astringent injections had been employed by a practitioner who had been consulted, but without any effect upon the complaint or its symptoms. Tonics had also been exhibited without any advantage. An examination being allowed, the uterus was found unusually low, and the neck of it possessed a much greater degree of sensibility than is common ; so that, pressure being made upon it, the patient complained much ; but this increased sensibility did not extend to the neighbouring parts, neither was there any alteration in the structure of the parts. This lady had been in the habit of taking much riding exercise, and it is more than probable that to this cause was to be attributed both the tenderness of the cervix uteri, and the descent of the whole organ. Prolapsus uteri being a very infrequent disease in women who have not borne children, the patient was desired to lose several ounces of blood from the loins, to live temperately, to avoid riding exercise, to take only a sufficient quantity of walking exercise to keep herself in health, and to inject some tepid water into



the vagina. Sexual intercourse was of course interdicted. Soon after this plan was instituted, the symptoms diminished. On account of the painful menstruation, some diaphoretic medicines, with opium, and the use of the hip bath, were recommended, and the sufferings at the periods were subdued. At the end of three or four months, the complaints were removed ; but the patient did not become pregnant.

In the above case, it is to be presumed that violent exercise was the cause of the disease, which was complicated with prolapsus uteri.

In some cases the increased action of the neighbouring parts is excited, and co-exists with the disease under consideration.

A young woman, aged twenty-two, whose habits of life had been very irregular, but who had borne one child at the age of eighteen, was gradually attacked with pain at the bottom of the abdomen, which extended towards the back : although the

pain was not constantly violent, she never was wholly free from it, but it was always increased upon sexual intercourse, which had been attended with some difficulty in the last three months: a milky discharge attended these symptoms. On making an examination, the entrance of the finger was impeded by an encysted tumour, containing a fluid, upon the right side of the vestibulum, and extending upwards towards the vagina. The tumour was as large as a pigeon's egg, and was insensible: on carrying the finger towards the uterus, the neck of this organ was found exceedingly tender upon pressure. As the patient was very desirous to have this tumour removed, and as it was to be apprehended that some hemorrhage might attend the operation, the author was determined to ascertain how far this loss of blood would prove a remedy for the inflamed state of the cervix of the uterus. Accordingly, he made an incision into the parts covering the tumour, and dissected it out, being assisted in the operation by Mr. Hewitt, the apothecary of St. George's Hospital. The bleeding which

followed the removal of the tumour was excessive, and syncope was produced ; by plugging up the parts, however, the hemorrhage was at length restrained, the wound granulated, and the sore healed. All the former discharge ceased, and the tenderness of the cervix of the uterus subsided.

The author lost sight of this patient from the year 1813, when the operation was performed, until the month of October, 1819, when he was consulted, together with Dr. Maton, respecting her. The pressing symptom at this time was a distended bladder without the power of expelling its contents ; the urine was drawn off with a catheter ; and, on carrying the finger into the vagina, the uterus was found enlarged to the size of a large orange, which, having fallen backwards into the hollow of the sacrum, had, by means of its cervix, made pressure upon the meatus urinarius. This disease had taken place since the year 1813 ; and, indeed, in consequence of the continuance of former intemperance, chronic enlarge-



ment of the liver was present, and the skin of the patient had assumed a dirty appearance. Profuse menstruation had come on, which had further debilitated the powers of the system ; and the probable termination of such an assemblage of maladies could hardly be doubted.

In the preceding history may be traced the progress of a disease at first shown only by increased action of vessels, which was removed by blood-letting and by rest, for a time : but the flame, though subdued, was not extinguished : — ready to be lighted up, upon the application of those exciting causes, debauchery and intemperance, it was rekindled ; and, in all probability, at a period not very distant, will consume the frame which engendered it.

In a young woman who laboured under this complaint two years since, and who was seen by Sir Henry Hallford, and by the writer, the attacks of pain referred to the back and to the abdomen were very violent ; and the bladder was so much affected, that

a retention of urine was present, so as to require, on several occasions, the use of the catheter. The intensity of the pain in this patient was greater than in any other case of the kind which the author has witnessed.

It is not uncommon to meet with encysted tumours in the neighbourhood of parts where increased action is going on. The author has several times met with such in the labia, and in the cellular membrane about the vagina, when local inflammation has existed in the vicinity. The following case is a farther illustration of this fact in the complaint under discussion.

A young healthy woman, who had been married nine months, consulted Mr. Freeman, of Spring-Gardens. Since the period of her marriage her health had declined, and her strength had diminished. Her menstruation, too, had become irregular; the intervals between the periods being much longer than is natural. Much difficulty attended sexual intercourse, which

was always attended with pain. The patient had been liable, also, since her marriage, to a discharge of a whitish mucus from the vagina, at the upper part of which canal a constant uneasiness was felt. On examination, which was very painful, there was found a tumour as large as a French walnut on the left side of the vagina; and upon the patient being made to strain, it could be brought much lower. The finger being carried up to the uterus, the pain was greatly increased when pressure was made upon the neck of that viscus, even in a very moderate degree. The constant irritation produced by this uneasiness had accelerated the circulation; which circumstance had produced some degree of emaciation.

As this tumour evidently contained a fluid, it was determined to evacuate its contents; which was effected by puncturing it with the point of a lancet. About an ounce of a clear, colourless fluid escaped. The sides of the cyst collapsed, and the canal of the vagina of course became more

capacious. A plan of treatment was directed, with a view to diminish the local increased action, and perfect rest was enjoined. When the author, at the end of a few days, saw the patient again, the tenderness of the cervix uteri was nearly gone ; the milky discharge had ceased ; no farther accumulation of fluid had taken place in the cyst, and the patient shortly returned to health.

In the two cases last related, it appears that the action of the parts had been greatly increased. In the first, by the notorious irregularity of the patient's life : in the second, by the difficulty attendant upon connection. Perhaps, also, the parts might be more likely to take on inflammatory action, in consequence of the interruption of the monthly secretion.

Although the author has stated, that, generally, the constitution does not sympathize with the local irritation, the following case will prove an exception to this rule ; it being manifest, that great disturb-



ances of the system took place upon the first attack of the disease, which diminished as the complaint subsided.

A married lady, between thirty and forty years of age, who was attended by the late Sir Walter Farquhar, Sir Gilbert Blane, Mr. Chilver, and the writer, had for some time been suffering from pain at the bottom of the back and abdomen, which continued to increase for some days, at the end of which a violent paroxysm of fever took place; the rigor was very considerable, and of long duration; and the hot fit which succeeded was in proportion to it. A repetition of these febrile paroxysms took place at the end of some hours. The pulse was very frequent, and, at the same time, hard. It was thought right to bleed the patient, and twelve ounces of blood were removed from the arm, which, upon standing, put on the usual appearances of blood taken under the influence of inflammatory action.

A solution of sulphate of magnesia, in

infusion of senna, was given, and a number of evacuations were procured, upon the surface of each of which the patient observed a small quantity of a substance which looked like a solution of isinglass. At first it was thought that this substance came from the rectum ; but it was afterwards ascertained, beyond a doubt, by the patient, that it was squeezed out of the vagina immediately after the fæces had escaped from the anus. After the bowels had been freely evacuated, small doses of antimony and mercury were exhibited, and the patient was kept in bed upon an abstemious diet. Soon after the removal of blood, and the action of the purgative medicines, the pain abated ; and, although it did not entirely disappear for many days, the glutinous discharge from the vagina ceased immediately, and the excitement of the system subsided.

In this case, it is true, no examination was made ; but as the usual symptoms of the complaint were present, and as both the pain and the discharge of the white glutinous

secretion ceased upon the employment of the means directed, there can be little doubt that here, as well as in the former cases, the complaint consisted of inflammatory action of the cervix of the uterus, accompanied by its constant attendant, the peculiar white discharge.

The introduction of a few cases tends greatly to illustrate the history of diseases; and it is hoped that enough has been said to prove, that the presence of the white mucous discharge is attended by pain referred to the lower part of the abdomen and back; that, on examination, the cervix of the uterus is found to be unusually susceptible of pressure, whilst the neighbouring viscera are in a healthy state, and that the antiphlogistic mode of treatment is adapted to the removal of the symptoms.

In ordinary cases, the most successful mode of treatment is to take away some blood, either by cupping, or by leeches applied to the groins or to the back; and it

may be necessary to repeat the local blood-letting several times. If symptomatic fever should be present, as in the case last related, it will be prudent to open a large vessel; but this is seldom requisite; and all useful purposes are answered by local blood-letting. The hip-bath proves a useful remedy, and the patient may sit in it twice a day, the water being heated to about 90 degrees. Where the hip-bath cannot be conveniently procured, fomentations of warm water, or of decoctum papaveris, to the back or to the abdomen will be found serviceable; and, even during their application, the patient is frequently made much more comfortable. Tepid water, thrown into the vagina with a syringe, constitutes a direct fomentation to the part affected, and it may be recommended with advantage.

It is very useful to keep the bowels in a relaxed state; and, for this purpose, small doses of sulphate of magnesia will answer exceedingly well in plethoric habits, and it may be exhibited in any agreeable vehicle. In languid habits, it may be advisable to



substitute expressed oil in its stead. Half an ounce of ol. ricini may be given in the morning, or two drachms in the morning and at noon, with a drachm of manna. All purgatives which irritate the lower part of the bowel should be carefully avoided.

Every night, at bed-time, it is expedient to exhibit some medicine which will determine the circulation to the surface of the body, and produce a general tranquillity of the system. For this purpose the following formula may be ordered :—

℞ Pulv. ipecac. compos. gr. v.

Camphoræ gr. iii.

Confect. ros. canin. gr. iii. M.

Div. in pilulas tres, omni nocte sumendas,  
cum hoc haustu :

℞ Succ. limonis ꝑ℥.

Ammon. carbonat. gr. xv.

Syr. cort. aur. ʒi.

Aquæ menth. sativ. ʒi℥. M.

Fiat haustus.

If strangury should be considerable in degree, the exhibition of a larger dose of opium will be found to afford the most ready and certain mode of procuring relief; and for this purpose 60 or 80 drops of laudanum ought to be given, or a grain of opium may be introduced into the rectum. Smaller doses, frequently repeated, may be necessary afterwards. Mucilaginous drinks of different kinds may be taken, and, indeed, will suggest themselves to the mind of every practitioner.

In all cases where the bladder cannot expel its own contents, and when distension of its coats is produced, recourse should be had to the use of the catheter; for, in addition to the great distress attending this circumstance, the patient may be placed in hazard by inflammation of this part. It is usual with some persons to employ diuretics in this case, and to content themselves with exhibiting nitric æther, and placing their patient over the steam of warm water: but nothing can excuse such a useless practice; and no professional man

is warranted in leaving such cases when he can draw off the urine—an operation which, if properly performed, is attended with neither pain, difficulty, nor exposure of the person.

It is seldom requisite to keep the patient in bed ; but the horizontal position should be persisted in for some time, and all new causes of irritation avoided. After the removal of the complaint, great care should be taken by the patient not to expose herself to those circumstances which were supposed to lay the foundation for the original production of the disorder, lest a renewal of it should be caused by such means ; or lest the parts should take on a disposition to permanent increased action.

The disease which bears the greatest resemblance to that above described, is

#### INFLAMMATION OF THE SUBSTANCE OF THE UNIMPREGNATED UTERUS,

respecting which a few observations will here

be made.\* It will be observed, that, although the pain in both complaints is referred to the same part in inflammation of the unimpregnated uterus, there will be found not only the pain arising from local inflammatory action, which is of course *permanent*, but also *occasional* pains which come on and retire after the manner of early labour pains. Besides, a milky discharge from the vagina does not accompany inflammation of the substance of the uterus, in which latter complaint pressure above the pubis greatly aggravates the pain.

INFLAMMATION OF THE SUBSTANCE OF THE UTERUS is not an unfrequent disease; it is not attended by symptoms so acute as might be expected, when the unyielding texture of the muscular fibres of the organ is considered: but it is to be recollected that the uterus, with the exception of its cervix, is not a very sensible part; and

\* Some years since a paper containing several useful observations on this complaint was read by Mr. Fernandez, of Lamb's Conduit Street, before the members of the Lyceum Medicum Londinense.



that it is not only defended from external pressure by the circle formed by the bones of the pelvis, but that no solid parts lie immediately in contact with it. In the violence of the pain, there appears to be a great difference between the inflammation of this organ in its impregnated state, or soon after delivery, and in its *unimpregnated* state. A very ready explanation of this fact presents itself. The uterus during pregnancy, and for some time afterwards, is larger, and therefore there is a greater extent of inflammation ; added to which, the nerves and blood-vessels of the uterus become larger in pregnancy, and this part is constantly under the influence of pressure from the muscular parietes of the abdomen, and of the diaphragm in breathing. The complaint is more frequently called into action by local violence than by any other cause : it is not an uncommon consequence of marriage. The application of cold may excite it ; but the viscera of the abdominal cavity are much more likely to suffer from this cause than the uterus. Inflammation of the substance of the unimpregnated

uterus is attended by a constant uneasiness referred to the pelvis, and this gradually increases, seldom becoming intensely violent, but greatly interfering with the comfort of the patient, who complains of pain sometimes at the bottom of the abdomen, and sometimes in the back. Superadded to the permanent pain, violent pains occur by paroxysms, with irregular intervals: these are of short duration. It appears that these pains are present whenever inflammation attacks muscular parts, or parts in the immediate neighbourhood of muscular fibres; as in inflammation of the stomach, sometimes causing a sudden pumping up of its contents. In inflammation of the bladder they are also present, causing one of the great annoyances of that disease—strangury.

In these instances, the inflammatory action becomes a stimulus to the muscular fibres of the organ; and they are made to contract, as upon the application of any other exciting cause. If pressure be made by the hand immediately above the pubis,

the uneasiness of the patient will be increased.

A rejection of the contents of the stomach, in very irritable habits, accompanies the disease; but, like all the other sympathies, the frequency of its occurrence will have reference to the disposition to be acted upon, which the patient may possess.

Numerous instances present themselves in which parts, whose functions are not immediately necessary to the continuance of life, undergo a considerable degree of morbid action, without producing much constitutional disturbance; provided there is no tension of the parts covering them, and that such morbid action does not interfere with the due performance of functions in the vicinity.

Every one at all accustomed to examine dead bodies must have seen a variety of examples of disease in the kidneys, and in the ovaria, where no symptom of such complaints was displayed in the lifetime

of the patient. The author has met with large abscesses in them, and in other parts, where no evidence had existed that such complaints were present. Thus, in inflammation of the substance of the unimpregnated uterus, the circulation is seldom found much accelerated, neither is much hardness communicated to the coats of the artery in feeling the pulse. The heat of the body is not much, if at all, increased beyond the natural standard; and, although the tongue may not be clean, it does not possess that slimy whiteness which is so constant an attendant upon peritonæal inflammation.

The disease sometimes lasts a great length of time, if no attention be paid to it; the violence of the symptoms always increasing before each period of menstruation, and diminishing after the period has passed by.

When the disease has been of long continuance, the function of menstruation becomes suspended in some women; an



occurrence which might be expected from the existence of disease in the organ which performs it : and, under such circumstances, the symptoms of the complaint are aggravated.

When inflammation of any of the viscera of the abdomen or pelvis is found to exist, it commonly happens that practitioners, anxious to combat and subdue so important a malady, resort to the use of the lancet ; but, in inflammation of the substance of the unimpregnated uterus, unless the peritonæum has participated in the disease, the blood drawn seldom possesses the inflammatory crust. Neither will the relief obtained in consequence of the operation, be commensurate with the activity of the means employed, nor be answerable to the expectations of the prescriber. Much more advantage will be derived from topical blood-letting. Scarifications may be made upon the sacrum, and cupping-glasses afterwards applied, or a dozen leeches may be applied to each groin, or across the pubis, and the bleeding may be solicited by the

immersion of the hips in warm water immediately after the leeches have fallen off.

At the end of a week or ten days, the local bleeding may be repeated, and it will be found useful to apply a dozen leeches to the neighbourhood, in the intervals between the periods of menstruation.

Fomentations, consisting of a mixture of *tinctura opii* and *decoctum anthemidis*, in the proportion of an ounce of the former to a quart of the latter, should be used twice or thrice in the twenty-four hours; and, if the symptoms should not be disposed to yield, the patient should be kept in bed, and small doses of antimony may be given in a saline draught, once in four or six hours, with three or four drops of *tinctura opii*, or  $\bar{5}$ i of *syrupus papaveris*.

Purging is known to be so eminently useful in allaying inflammatory action, that it should by all means be employed; and, for this purpose, a full dose of *magnesiae sulphas*, or of *soda tartarizata*, may be

given in a draught of infusum sennæ every other morning. The diet of the patient should be light, and not stimulating ; but, as many of these cases occur in persons of irritable habits, who are seldom found to be strong, it will be desirable not to reduce the powers of the system too considerably.

As, in many cases of inflammation of the substance of the unimpregnated uterus, the symptoms are found to diminish after each period of menstruation ; and as, in others, the complaint has succeeded to an interrupted state of this function, it will be advisable, when the urgency of the symptoms shall have subsided, to endeavour to restore this secretion to its natural state.

With a view to effect this intention, the state of the general health of the patient is to be accurately observed ; for nothing can be more unwise and empirical than to subject all patients, under such circumstances, to a similar mode of treatment ; and yet such practice is too often pursued, frequently to the increase of the disorder,

and on many occasions to the manifest injury of the patient.

There is a class of medicines (formerly called emmenagogues), which were supposed to be capable of exciting a specific influence upon the uterus; and of these, the greater number are either general or local stimulants. It is obvious to common sense, that such medicines cannot be exhibited justifiably in all the variety of cases of obstructed menstruation, even were they capable of effecting what is proposed. On no subject, perhaps, have there been more erroneous notions entertained, or more injurious directions given, than on that of diseased menstruation. Prejudice has occupied the place of science, and a popular nostrum has been exhibited, often without, and sometimes with, the concurrence of the practitioner.

Cases of suppressed menses having been regarded as arising from debility of the system or of the local vessels, it has been too frequent a practice to resort in all cases



indiscriminately to the same supposed means of relief, — to the exhibition of chalybeates, gum resins, irritating purgatives, and cantharides. No diseases admit of being treated so generally; even the most simple complaints require care in their management; in the cure of the itch by brimstone, the skin of one patient will be inflamed by a preparation of this drug, which will produce no mischievous effects in another. If cases exist of obstructed or suppressed menses, where the fluid is tardily secreted, in consequence of general or local debility, there are many others in which an opposite state of the frame becomes the cause of their production. The reason is obvious: — the function of menstruation, like the other functions of the body, is best performed when the system is in health. Now, health is not constituted by excess of fulness, or by the performance of violent actions, any more than by debility, or enfeebled action; consequently, the exhibition of stimulants will not influence this secretion, unless attention be given to the restoration of the

general health of the patient, even in cases of debility. Still less will such a mode of treatment be applicable to cases of interrupted menstruation occurring in plethoric habits, where the presence of the plethora itself is the cause of the interruption of the due performance of the natural secretions.

Instead, then, of resorting to such measures, to the employment of the whip and of the spur in such cases (where, if they do any thing, they do mischief), let the morbid peculiarities of the constitution, and the habits of life of the patient, be taken into consideration; let the first be counteracted, the second be improved; let the sanguine have her excess of fulness diminished, let the debilitated have her powers augmented; in short, let the general health be amended, and the functions of health will be restored.

The different secretions of the body are governed by the same laws, are affected by the same causes; a derangement of one of

them can seldom exist long without being attended by a disturbance of the rest ; and constitutional derangement will interrupt almost all of them.

Every day's experience shows that when the secretions of those organs, which are esteemed of the greatest importance to health and life, are duly performed, other secretions, which appear to be in unison with them, proceed also with the greatest regularity ; and *vice versa*. When the liver becomes indolent, and no bile is secreted, the mouth becomes clammy, the urine scanty, the skin dry, and, perhaps, from the latter circumstance, hot ; a harsh skin being an almost constant attendant upon a diseased state of the secretions, subservient to the process of digestion. But, let means be taken to restore the function of the liver ; with the increased secretion of bile will be found a return of saliva, a more abundant discharge of urine, and a soft skin. So, in that constitutional affection called fever, the secretion from the skin, the mouth, the liver,

and the kidneys, is interrupted; but, the febrile action having subsided, they one and all return. No man in his senses would think in such a case of giving his patient diuretics to excite the kidneys; mercury, the liver; pyrethrum, the salivary glands; or of applying heat to produce sweating;—no man in possession of reason would attribute the presence of the fever to the want of one or the other of these secretions: but, let the case be changed; let obstructed menstruation be a feature of it; the patient and her friends are possessed with a notion, that this circumstance is the cause of all the other ills; a similar impression is made too frequently upon the mind of the medical attendant, who, from that moment, directs all his attention to the uterus, and subjects his patient to a course of myrrh and steel!

Accidental circumstances, as the application of cold or fatigue, may have proved the original cause of interruption to the menstrual discharge by exciting an attack of fever: in this case let the patient remain



quietly in bed ; let her be supplied with cool drinks ; let her bowels be kept free ; and, if any medicine is to be given, let it be a saline draught occasionally : the effect of such a mode of treatment will be to remove the febrile symptoms ; when, health being restored, the functions of health will be performed.

It is by no means uncommon to meet with cases of amenorrhœa produced by a disproportion between the wear and tear of the system, and the supply of food. Luxurious living, or a very sedentary life, may have produced a plethoric unhealthiness of the constitution, incompatible with the performance of the natural functions : in such a subject, abstemiousness with increased exercise will of themselves prove advantageous remedies ; and although no regard be paid to the menstruation, it will frequently spontaneously return.

If, however, these remedies alone should not be sufficient to remove this state of the system, recourse must be had to venæsection and the employment of saline

purgatives. It should here be remarked, that full bleedings are in this case much more useful than the frequent removal of small quantities of blood. The patient should not lose less than from sixteen to twenty ounces of blood at once. Under ordinary circumstances it is very immaterial from what part of the body the blood is taken, provided the vessel is large and the orifice in the vein sufficiently so to allow the blood to escape rapidly ; but if there should be any evidence of local congestion, it will be right to remove the blood from the neighbourhood of the part when such congestion is apparent : as from the external jugular vein, when there is pain in the head and giddiness.

If, lastly, in consequence of confinement, breathing an impure air, or low living, the patient's general health should have suffered, and debility attended by obstructed menstruation should have been produced, constituting the true case of chlorosis, it will be necessary to invigorate the frame by every means in our power.

The efforts of art should be first directed to strengthen the stomach by the lighter bitters, and by food of the most digestible kind, proceeding by slow degrees to the use of tonics of greater power, such as bark and steel.

The constitutional weakness having been removed, if the menstruation should not return, then, and not till then, should stimulants be substituted for, or added to, the remedies before employed.

It is probable that there are no medicines which exert a specific effect upon the uterus, and that those which have been employed with this view have either been wholly inert, or that they have acted either as general stimulants, or as stimulants upon those parts in the immediate neighbourhood of the uterus.

Volatile alkali, spices, essential oils, and wines, are the general stimulants in use ; to which may be added the use of the cold

bath when not contra-indicated. Cold bathing is, however, very obnoxious to particular constitutions, and it is never advisable when the stomach has more than its proportion of weakness.

The stimulants which exert their influence upon parts in the vicinity of the uterus are sabina, lytta, helleborus niger, many of the resinous gums, electricity, and horseback-exercise.

The most convenient mode of exhibiting the savin is that of the *tinctura sabinæ composita*, of which  $\mathfrak{z}\text{i}$  may be given three times a day in some aromatic bitter draught.

R Infus. cascarillæ  $\mathfrak{z}\text{i}$ .

Aquæ pimentæ  $\mathfrak{z}\mathfrak{ss}$ .

Tinct. sabinæ comp.  $\mathfrak{z}\text{i}$ .

Syrup. zingiber.  $\mathfrak{z}\text{i}$ . M.

Ft. haustus ter die sumendus.

The quantity of the *tinctura sabin. compos.* may be increased to  $\mathfrak{z}\text{i}\mathfrak{ss}$ . or  $\mathfrak{z}\text{ii}$ .



The internal exhibition or the external application of lytta causes irritation of the urinary passages, with which the uterus sympathises. The knowledge of this circumstance (sometimes a great inconvenience when blisters are applied) is available in the case of obstructed menstruation. A blister may be applied occasionally to the region of the sacrum.

The safest mode of exhibiting this medicine internally is in the form of the tincture. The patient may commence with ten drops, which dose may be increased to thirty ; the vehicle may be infusion of cascarilla, or any other warm tonic.

Black hellebore is a drastic purgative, and, when given as an emmenagogue, should be employed in such a dose as will produce an effect upon the bowels. The uterus is probably affected from juxtaposition. It may be substituted for the tinctura lyttæ in the last prescription, and it may be given in the dose of  $\mathfrak{z}\text{i}$ . or more.

Myrrha, thus, galbanum, aloës, the last especially, possess the power of stimulating the lower part of the rectum ; and unless they are given so as to produce this effect, they will be found of little service beyond that of causing the expulsion of the contents of the alimentary canal ; but even with this intention, they become more useful than purgatives of any other class ; as the bowels are unusually torpid, and yield to the action of such medicines more readily than to that of either the oily or the saline kind.

If the patient should be distressed by excessive irritation about the anus, an ounce of infus. lini may be injected once or twice daily, and the medicines intermitted for a few days, or until these symptoms shall have subsided.

In cases of dyspepsia in either sex, which are not accompanied by organic disease of the viscera, riding on horseback is acknowledged by all practitioners to be a valuable auxiliary in the treatment of the disease, as

it enables the patient to take exercise without much fatigue; whilst at the same time the descent of the contents of the stomach and bowels is favoured by the agitation of these parts, and by the action of the abdominal muscles upon them. Not so when organic changes are suspected to exist; as these have inflammation for their basis, it is evident that whatever excites action in such parts will augment the mischief, which will indeed manifest itself by an increased tenderness of the part, or by an accelerated circulation.

The same observation may be made respecting the uses of tonics and stimulating purgatives, which, however useful they may prove in cases where the powers of the stomach have been weakened by fatigue, watching, or anxiety, never fail to aggravate that embarrassed state of the chylipoietic viscera which is symptomatic of active disease of the uterus, or attendant upon the altered organization of the viscera themselves.

Under a treatment of a mild character, the occasional application of a few leeches, the administration of a little manna, oil, or magnesia, and small doses of hemlock, and under a diet at once soft and nutritious, but by no means stimulating, the author has known several instances of patients living many years, even where emaciation had taken place to a great degree; when, after death, disease (the result of slow inflammatory action) was discovered, and that to a considerable extent, in the pylorus, the small intestines, and the liver. Physicians have of course frequent opportunities of witnessing such cases.

The remaining emmenagogue is electricity, the powers of which are very considerable in exciting the uterus to vigorous action. By means of it, a great number of cases of amenorrhœa have been cured, when no other means had been successful. The muscular fibres of the uterus, like those in other parts of the body, are probably stimulated by it, and the circulation



of blood through the organ carried on with greater energy ; and perhaps the secreting extremities of the arteries are themselves excited ; but, as the author has known many instances of its good effect, and two or three when the patient has menstruated upon the insulated stool, the *modus mendendi* is of little consequence. Like many other of the emmenagogue remedies, it can never be useful, until the powers of the system have been restored, and until the general health has been established. Even were this otherwise, it would be imprudent to employ them, as every loss which the constitution sustains is a loss of so much power, and this at a moment when it is as great an object to save strength as to give it.

The electrical shock is the only advantageous mode of applying the remedies ; sparks are of no service. The patient should therefore have several shocks passed through the pelvis daily, both from before to behind, and from side to side. The strength of the shock should be increased

as the patient may be enabled to bear it, and it should be resorted to at those times, especially, at which any indications of the menstruating function should present themselves.

The author has been induced to make these few observations upon the subject of interrupted menstruation, in the hope that they may prove useful to the younger members of the profession, who are compelled to collect their information and experience upon these subjects very slowly.

To return to the subject of Inflammation of the Cervix of the Uterus.

This disease occurs frequently in those habits, in which the blood is distributed through the different parts of the body very unequally, and in such cases it will generally be found that the system is unusually weak; there appears here to be a resemblance between inflammation of the cervix uteri, and those cases of inflammation of glands met with in different parts of the

body, as in the neck, the axilla, the groins, and especially in the mesenteric glands of children.

These cases do not admit of being treated by antiphlogistic remedies, or by low diet; on the contrary, they will be usually accompanied by a slow formation of bone, or by thickening of their extremities in the long bones; by a flabbiness of the muscles; by a want of tone in the integuments; by symptoms which demand the employment both of medical and culinary means of restoring the failing powers of the constitution.

The cervix of the uterus is a glandular part: its secreting organization can be demonstrated. It is subject to the diseases of glands in other parts of the body, and, in all probability, will be particularly liable to take on disease in habits which are prone to other glandular complaints, namely, in weak habits.

The majority of cases of disease in the breast and in the testicle arise in such states of constitution.

It will accordingly be right, whenever inflammation of the cervix of the uterus occurs in such a frame, to endeavour to invigorate the system, and to equalize the balance of the circulation: an object frequently attainable by the exhibition of tonics, amongst which, the Peruvian bark and some preparations of iron, are the most serviceable. Of the former, the decoctum cinchonæ, of the latter, the tinctura ferri muriatis, will generally best fulfil the intentions of the practitioner.

It must, however, be confessed, that cases of unequal distribution of blood, whether the determination be made to the head, the chest, the uterus, or any other organ, are very unmanageable, and often baffle all the endeavours of the practitioner to regulate or remove them.

In conclusion, it must be observed, that a great point is gained in ascertaining the true nature of this disease, of which the milky discharge is symptomatic; for thereby the physician or surgeon is led to direct

such measures as may tend to remove its cause, instead of those astringents too often employed in such cases: besides which, it should be recollected that the *cervix* of the uterus is the seat of the disease; that the *cervix* of the uterus is the most sensible part of the whole viscus; and that it is the *cervix* of the uterus which carcinoma always selects as its point of attack. Surely, then, it is not too much to apprehend that slow inflammation in the glands, seated in this part, may lay the foundation for the commencement of carcinoma; or, perhaps, for other alterations of structure in its neighbourhood. On all of these accounts, it is prudent and desirable to endeavour to remove as quickly as possible any of its diseases, but especially one in its own nature so important as inflammation.



## CHAP. II.

## WATERY DISCHARGE.

By the above term is meant that form of discharge which resembles clear water, having no colour, and which contains very little glutinous matter, sometimes none at all.

The variety in the thickness of these discharges probably depends upon the greater or less quantity of albumen diffused through them.

It is intended to comprehend the history of three different diseases under the head of "WATERY DISCHARGE."

I. CAULIFLOWER-EXCRESCENCE OF THE OS  
UTERI.

II. HYDATIDS OF THE UTERUS.

III. THE OOZING EXCRESCENCE OF THE  
LABIA.

These three are the only diseases which, in the knowledge of the writer, are attended by watery discharge of the character described above.

It is true that women are liable to an escape of water from the os externum; but such fluid will, upon examination, be found to possess the sensible and chemical properties of urine. A few observations will be made hereafter respecting these cases.

CAULIFLOWER-EXCRESCENCE OF THE  
OS UTERI.

Perhaps no organ in the body is liable to a greater variety of diseases than that which forms the residence of man during the first nine months of his existence. In consequence of affording this nidus to the ovum, of sustaining the foetus, and of expelling it when labour comes on, it became necessary that its structure should be very complicated. It accordingly is found to consist of many parts, possessing different kinds of organization adapted to the purposes for which they were intended. Its outer membrane, therefore, becomes liable to diseases of the peritonæum: its muscular structure to irregular actions, and to the formation of tumours in that structure, as well as in the cellular membrane connecting the packets of fibres to each other. Its internal membrane, performing the double office of the permanent secretion of mucus, and the occasional secretion of the menstruous fluid, by the extremities of

small arteries which terminate upon its surface, becomes subject to the diseases of mucous membranes; and it is, perhaps, more liable to attacks of inflammation than any mucous membrane in the body.

The cervix of the uterus differs from the structure of the other parts of the organ in being glandular, and thence it becomes subject to the diseases of glands; whilst the termination of this part in the vagina, at the os uteri, where it is covered by the inner membrane of the vaginal canal, is disposed to take on different forms of disease, one of which forms is that which stands at the head of this chapter.

A more appropriate name could not have been given to this disease, than "the cauliflower-excrecence." There is a striking resemblance between itself and a portion of the upper surface of a cauliflower, or a head of brocoli. The surface is granulated, and it consists of a great number of small projections, which may be picked off from the surface, as the granules may

be detached from the vegetable. The firmness of the tumour agrees also with that of the plant — here the granules will be large and irregular, there small and equal.

A membrane, very fine in its texture, is spread over the surface of the tumour, and from this membrane is poured out that aqueous secretion which characterizes, in a marked manner, this disease.

As the tumour occupies the upper part of the vagina, it is of course in the greater number of instances concealed from view ; but in three or four cases, in which the size of the tumour was so large as to fill the whole canal, and to protrude between the labia, the author was enabled to see the disease, and the colour of the tumour was found to be that which may be called a bright flesh colour.

If the membrane covering the tumour has been injured in an examination, the blood-vessels immediately beneath it pour



out their contents, which appear to consist of florid red blood, resembling that which is contained in the arteries of the body generally. The quantity of blood which so escapes will be proportioned to the extent of the injury inflicted upon the tumour. Similar discharges of blood sometimes spontaneously take place in those habits in which plethora exists, or where the circulation has been hurried by any exciting cause.

The cauliflower excrescence is not endowed with sensibility, the patient never complaining when pressure is made upon it. Its attachment is to the surface of the os uteri, and to that alone; it never can be traced into the cavity of the uterus. A small part of the os uteri may give rise to the disease, or the whole circumference of the opening may be occupied by it.

The growth of the tumour is sometimes very rapid; but the enlargement seems to be much influenced by the power of contraction of the vagina; so that when this

canal is very dilatable, as in married women who have borne many children, the tumour will very quickly increase in size ; whereas, the pressure of the sides of a less capacious vagina, as in single women, will greatly tend to control its enlargement, acting like a bandage upon it. The knowledge of this fact is available in the treatment of the disease.

When the tumour is of so large a size as to protrude beyond the labia, it branches out on either side, and, by pressing and irritating the surfaces between which it lies, it not unfrequently causes ulceration of them.

Hitherto it has not been ascertained what circumstances produce in the parts a disposition to take on the formation of this disease. It might be conjectured, that an injury inflicted upon the os uteri in labour, either by the head of the child, or by violent attempts made to dilate it, might become an exciting cause ; but many examples are to be met with, in which such

injury has been done to the os uteri, and no such disease has followed. Married women who have never been pregnant, nay, single women, are liable to the complaint, in whom no violence can have been offered to the os uteri.

It cannot be traced to any syphilitic cause. The common prostitutes of this metropolis are by no means more liable to it than any similar number of women in different stations of life. The disease arises as often in the strong and robust as in the weak; in persons who live in the country, as in those who inhabit large towns; in those whose situation in life obliges them to labour, as well as in those who, from their rank in society, sometimes consider themselves privileged to be useless members of it. \*

No period of life, after the age of twenty, seems to be exempt from the disease. The author has known it fatal at the age of

\* "Pallida mors æquo pulsat pede pauperum tabernas  
Regumque turres." *Hor. Od. 4.*

twenty; and he has met with the disease at different periods of life up to old age. The complaint may arise, perhaps, before the woman has reached her twentieth year, but no such case has occurred in the experience of the author.

It has been observed above, that arterial blood escapes from the tumour when injured: indeed the tumour appears to be made up of a congeries of blood vessels, and these blood vessels are arteries; the infinitely small branches of which, terminating upon the surface of the tumour, exhale in the most abundant manner an aqueous fluid.

Perhaps some small arteries near the os uteri may undergo that morbid dilatation of their coats which is analogous to aneurism in larger trunks, and thus the disease may be produced. Something similar to this takes place in the arterial, or blood-red nævus: but, here, the surface being covered by cutis and cuticle, no moisture of the part is met with; but, if the surface of such a nævus should be injured, arterial blood escapes.

May such a state of blood-vessels exist at the time of birth, remain concealed in early life from the very small quantity of blood which circulates in the organs of generation at this age, and be developed at that period at which blood rushes with greater force and in greater quantity, to enlarge these organs, and in the female to render them fit for the performance of new duties ?

It may be that the increased circulation which is present at puberty, may not be sufficient to elicit the phenomena of the complaint; the stimulus of marriage may be required in some, whilst in others, the further developement of the organs in pregnancy, or the exertions of labour may be necessary to call forth the morbid symptoms of such hitherto dormant disease.

In a paper upon the subject of the cauliflower excrescence of the os uteri, contained in the third volume of the "Transactions of a Society for the Improvement of Medical and Surgical Knowledge," by the author's



brother; the late Dr. Clarke, it is stated "that he had never been enabled to find a specimen of the disease in any collection of anatomical preparations; he sought for it in vain in the collections of the late Dr. William Hunter and of the late Mr. John Hunter; and in all the enquiries which he had made amongst those who had the best opportunities of finding it in the dead body, he was never able to procure a specimen of it."

No one had seen a tumour resembling a cauliflower-excrescence in the dead body: why they had not will presently appear.

Some years ago a lady died of this disease: she had been examined a short time before her death; and in the vagina a tumour of the cauliflower-excrescence kind was found, arising from three fifths of the circumference of the os uteri: on the day following that upon which she died, an examination of the body was made by the author in the

presence of his brother, and of Mr. Alexander Sheddon.\*

Upon dissecting out the uterus and its appendages, and slitting open the vagina, no tumour was found there; although, in the last examination which was made in the lifetime of the patient, an excrescence was discovered nearly as large as a hen's egg: but, from that part of the os uteri to which the tumour formerly adhered, a soft, flaccid, slimy, whitish substance, hung down, which looked like the fœtal portion of the placenta of a calf, after it has been macerated in water. The body and the fundus of the uterus were sound.

An attempt was afterwards made to inject this flocculent substance with size and vermilion, thrown into the arteries of the uterus; but, although the blood-vessels of the uterus itself were abundantly filled with the injection, and, although the flocculent

\* An ingenious surgeon, to whom the writer is indebted for the drawings of many of the diseases described in the first volume of this work.

mass itself received the injection, the fluid escaped from its surface as fast as it was thrown in from the pipe of the injecting syringe.

The author has the preparation at present in his collection : the flocculent mass is heightened in colour by the small quantity of injection which remained in its vessels ; but it floats lightly in the spirit in which the preparation is suspended, as it did in the water in which it was at first macerated.\*

Margaret Pole, the mother of eight children, discovered that she was pregnant in the beginning of the year 1810. From the commencement of the pregnancy to its termination she had a profuse watery discharge from the vagina, which was, upon any trifling exertion, mixed with blood.

The practitioner who was called to the patient on the first of July, found her in

\* There is a striking resemblance between this preparation and that of the fœtal part of the placenta of a cow, injected with size and vermilion.

labour, and made the usual examination: upon carrying his finger into the vagina, he found a large tumour there, resembling placenta; and as upon endeavouring to ascertain its extent, a large discharge of blood followed, it was determined that the author should be called in. In addition to the hemorrhage, the patient was constantly vomiting; from the concurrence of which two circumstances a state of great exhaustion was produced: the pulse was very feeble and frequent, and occasionally appeared to be lost, when an effort to vomit, or a violent struggle of the frame, which threatened to terminate the existence of the poor woman, again excited the action of the heart, and a sort of half-existence was thus carried on.

When the author examined the patient, he found within the vagina a substance which nearly filled it, and which felt like the placenta; but upon tracing this upwards, he ascertained that, instead of coming down through the os uteri, as in presentations of the placenta, it actually constituted a portion

of it, so that there was scarcely any part of the circumference of this opening to which the tumour was not attached. At this time the os uteri was not much dilated. It was agreed that the patient should be supplied frequently with nourishment, and that the usual local modes of restraining uterine hemorrhage in labour, with the exception of delivery, should be resorted to.

When the patient had passed over a few hours, the os uteri was more open, the uterus was in occasional action, and there was a profuse discharge of a watery fluid, tinged with blood.

Under this lamentable combination of circumstances, the existence of a formidable and fatal disease, and the presence of labour, the great question was, how the patient should be treated. The head was too low in the pelvis to admit of the child being turned; to open the head would have been to destroy the child, supposing it to be still alive, with the probability of affording no advantage to the woman; to perform



the Cæsarean operation would have caused, in the deplorably weak state of the mother, her immediate death, and that when it was doubtful whether the child was alive or not.

As the tumour was evidently of the cauliflower-excrescence kind, and as it was probable that, being so, it would be diminished in bulk by the pressure of the child's head in its descent, the contents of the blood-vessels being thus squeezed out, it was determined to wait, and to watch the progress of the labour, the friends of the patient having been informed of her perilous situation. Eventually, that, which was anticipated, happened; the contents of the tumour were squeezed out; the child passed naturally through the vagina; but the woman was attacked with other symptoms of a sinking frame: apthæ appeared upon the tongue and the inside of the cheeks, and she sunk upon the third day after her delivery.

The body was examined; and upon cut-

ting open the vagina, the tumour had wholly disappeared, there remaining in its stead loose irregularly-shaped flocculent portions of matter, which arose from every part of the circle of the os uteri. There was nothing else found remarkable; and the uterus was as much contracted as it is usually found to be about three days after delivery.

An attempt was made in this case also to inject the tumour; but all efforts to do so were unavailing: the fluid escaped from the surface, and from the interstices of the flocculent mass, as quickly as it was thrown in by the injecting syringe.

The above cases contain histories of a tumour arising from the os uteri, possessing a firm texture during life, but losing this firmness after death. The circumstances of the disease resembling a portion of the placenta, so as to be mistaken for it at first, is too remarkable to pass without further notice. A carcinomatous thickening of the os uteri may exist during labour,

and the patient has been destroyed very shortly afterwards, by ulceration taking place; the author has a preparation of this kind: but a carcinomatous thickening of the os uteri bears no resemblance to the cauliflower-excrescence, and the size of the former remains unaltered by pressure, and undiminished by death.

Why then do the cauliflower-excrescence and a portion of the placenta resemble each other so closely, that the one has been mistaken for the other? They differ only in name, the structure is the same. The placenta consists of blood in blood-vessels; the cauliflower-excrescence consists of blood in blood-vessels. In a presentation of the placenta there is hemorrhage; so there is when the cauliflower-excrescence is injured.

Nothing can be better marked than this similarity; and if there was no further evidence to prove that the nature of the disease was a distended set of blood-vessels,

it would be rendered sufficiently probable from this resemblance alone.

The vessels of the pia mater, in the dead subject, resemble a flocculent mass, when drawn out of the interstitial spaces between the convolutions of the brain where they ramify, and they scarcely put on the appearance of having been blood-vessels; but, let injection be thrown into them, they readily become distended, and their real structure is rendered immediately evident.

In other parts of the body, small blood-vessels; very visible during life, are emptied of their contents into the larger trunks when death takes place; nay, in fainting, which is a near approach to death;—for example, in the membrana conjunctiva, the lips, the skin, and in most parts of the body where the ramification of small vessels can be distinguished.

If, in an examination, a small portion of the cauliflower-excrescence be detached,

and if it be pressed between the fingers, or macerated in water, its volume will be found to decrease very rapidly; in the one case blood will be squeezed from the blood-vessels, and in the other diffused through the water; and in both a flocculent mass will remain, resembling the appearance of the cauliflower-excrescence after death.

That the blood-vessels so distended in this disease, consist principally, if not wholly, of arteries, is to be collected from their contents, the colour of which resembles that of arterial blood, which is not returned into the general circulation by the termination of these vessels in small veins, but is carried off principally in that profuse watery secretion which causes such expenditure of the powers of the frame.

In the case of Margaret Pole, last related, the tumour was large enough to fill the cavity of the vagina entirely, which may be accounted for by the greater determination of blood made to the uterus in pregnancy by



the hypogastric arteries. Reasoning upon this circumstance, it may be fairly presumed, that as whatever tends to increase the flow of blood to the uterus, aggravates the symptoms of the disease, by increasing its volume ; so, whatever has the effect of rendering the circulation less active in this organ, will diminish the growth of the tumour.

Various attempts had been made during many years by the writer to procure a specimen of this disease which might illustrate its nature in his lecture-room ; but all his efforts were fruitless. The uteri taken from the patients whose cases have been described, and which are in the collection of the author, show the pulpy mass, but by no means demonstrate the appearance of the tumour during life.

In the removal of some of these tumours by ligature, it has been hoped that, upon the coming away of the ligature, the tumour would have been found in the vagina ; but this hope has not been realized : the supply

of blood having been cut off by the ligature, the blood has oozed from the tumour, and all which has been left has been a small pulpy mass.

The following case will serve as a correct picture of the disease in its progress; its diminution by astringents; its arrest by the ligature; its ultimate termination in the destruction of the patient, and the appearances found after death.

A lady, sixty years of age, the wife of a physician at Bath, had suffered under great debility for some months, during which time she had been liable to a profuse watery discharge. The symptoms increasing, and threatening her life, she came to London, and was placed under the care of the author. She was generally anasarcaous; had great difficulty of breathing, being incapable of lying down, from an apprehension of suffocation. The pulse was very weak and irregular, and the lips and tongue were bleached by the constant drain from the blood. The appetite was nearly lost, and

the powers of converting the small quantity of food which was taken into nourishment were almost wholly gone.

These symptoms commenced six years before, and had gradually increased to their present degree. On examination, a tumour of the cauliflower-excrescence kind was found in the vagina, nearly large enough to fill that cavity. By the frequent use of strong astringent fluids poured into the vagina, the discharge was in some degree controlled in the year 1811; but in the summer of 1812, alarming hemorrhage came on, which lasted during many days. These discharges of blood took place very suddenly (to use the patient's expression), as if some vessel had broken.

In July, 1813, small pieces of granulated flesh came away, mixed with blood; and the watery discharge was then so considerable, that more than twenty napkins were required daily, to keep the patient even tolerably comfortable. Hectic fever took place; astringents ceased to produce any

effect ; the tumour began to project through the external parts ; by the straining efforts of the patient at stool, splashes of arterial blood came away ; and the symptoms of weakness now became so formidable, that it was evident the patient would quickly sink under them, unless some additional mode of treatment was employed.

As the danger depended upon the profuseness of the watery discharge poured out by so large a surface, which was no longer controllable even by the strongest astringents, it was proposed to the patient that a ligature should be applied round the base of the tumour, so as to remove it. The patient was willing to accede to this suggestion : a ligature, consisting of about a dozen threads of waxed silk, was passed round the excrescence, close to the origin of it. On the seventh day after the application of the ligature, it came away, but no tumour came away with it. On examining the silver canula, by means of which the ligature had been applied, a

small piece of a flocculent substance was found adhering to it.

From this moment all discharge ceased, the dropsical swellings were absorbed, and the patient recovered her health sufficiently to return again into society. She was even well enough to undertake a long journey.

It had, however, been explained to her, that the disease might return; and in the summer of 1815, the originally diseased surface gave rise to another tumour of a similar kind, which at length caused the return of the former symptoms.

The patient became very solicitous that the operation, from which she had derived so much temporary benefit, should be repeated, which was accordingly done.

A ligature was applied round the tumour, which was now about the size of a hen's egg, and it was tightened so as to interrupt the circulation, but not so as to cut through the tumour at once. On the second day



the ligature was drawn yet more tight ; and upon tightening it upon the third day, the tumour came away. On introducing the finger into the vagina, the tumour was found detached : it was turned out of the vagina by means of the finger ; and it was immediately placed in alkohol, so as to coagulate its contents perfectly, and, by hardening it, to preserve its shape.

By these means a specimen of the disease was procured, from which the engraving in this work has been made. It is the only preparation which the author has seen of the disease as it appears during life. The engraving consists of the half of the tumour only, as the author was desirous to place a portion of it in some national collection of anatomical preparations.\* The tumour, when it was separated, was of a brownish-red colour. Relief was again afforded to the patient by the second operation : the watery discharge ceased, as

\* In the year 1829 the preparation was presented by the author to the Royal College of Physicians of London, in the museum of which it is deposited.

might have been expected, its source being removed.

A new set of symptoms, at the end of a few months, presented themselves ; pain in the hips came on, with cramp at the lower part of the abdomen, vomiting, and a discharge of muco-sanguineous fluid, sometimes mixed with matter ; and shortly afterwards the patient died.

It was evident that some new disease had formed. The examination made of the body after death will show what it was : — An incision being made through the parietes of the abdomen, the intestines were found perfectly healthy, and unconnected by adhesions ; but there was in the left hypogastric region an oval tumour of the size of a large melon ; this was connected to the loins on each side by a separate adhesion, and at its upper part it adhered to the omentum. On attempting to make an incision into this tumour, it was found that the knife would not pass deeper than an inch and a half, and in some parts not

deeper than half an inch, as it met with obstruction from bony matter. The substance which surrounded this bony matter was dissected off, and it was found to resemble layers of coagulating lymph. Upon sawing through the rest of the tumour, it was found to consist of a thin layer of osseous matter, encasing a substance similar to that which covered its external surface. There was no connection of this tumour with the uterus, except what must have been the effect of former inflammation, in consequence of which coagulating lymph had been thrown out, so as to glue the surfaces together: a very small quantity of flocculent matter appeared to project from the surface of the os uteri. The cavity of the uterus was larger than natural. The Fallopian tubes and ovaria were perfectly healthy.\*

\* This investigation was made by Mr. Stone: the preparation was not preserved, as it was not found to throw any farther light upon the disease.

*On the Symptoms of Cauliflower Excrescence of  
the Os Uteri.*

ONE of the first notices of this disorder is in the patient finding the parts more moist than usual; little attention, however, is paid to this circumstance, until the quantity of the discharge becoming more considerable, the patient is obliged to employ some means of absorbing it, and resorts, perhaps, to the more abundant use of cold water, or to the usual family receipt of isinglass and milk. Still the discharge becomes more abundant; but being unattended by pain or by foetor, the complaint is neglected, until at length a quantity of blood comes away with it, or the patient finds that the colour of her cheeks is fading, or the strength of her frame diminishing; then all at once she takes alarm, and flies to medical assistance. Perhaps the entire absence of pain, and of other symptoms, leading the woman to treat the disease lightly at first, is the reason why so few opportunities are afforded of examining the

tumour when of a small size. The quantity of the discharge is in proportion to the superficies of the tumour, and to the degree of action of the blood-vessels of the uterus and neighbouring parts: it may be in quantity sufficient only to render the woman's person uncomfortable, or it may require the change of twenty or thirty napkins daily. A small blood-vessel now and then allows some of its contents to ooze out, which, mixing with the discharge, gives a shade of colour to it, or perhaps a faintish odour; but when no blood is mixed with the discharge, or when the quantity of the watery discharge is so great as to run off as fast as it is secreted, there is little or no smell attached to it. If the patient should be a married woman, living with her husband, it will be found that hemorrhage always succeeds intercourse; and, indeed, in some instances the slightest exertion of the body, coughing, sneezing, or straining when at stool will produce a discharge of blood from the blood-vessels of the tumour, which sometimes becomes very profuse. When a large quantity of blood has been thus lost,



it is frequently observed, that the watery discharge diminishes, the distension of the vessels of the tumour being taken off. As the disease proceeds, the system becomes weakened from loss of blood, and the stomach partakes of this weakness. The digestion is performed imperfectly, spontaneous changes take place in the food, and air is either thrown up in frequent eructations, or the belly becomes tympanitic. In some measure the disturbance of the stomach may be the effect of sympathy of that organ with the uterus, but the symptoms very much resemble those met with after large hemorrhages. Hysterical symptoms are produced, and all that host of inexplicable phenomena which accompany cases of impaired digestion, increasing the patient's stock of bodily and mental misery. As the weakness increases, the action of the absorbent vessels diminishes, and depositions of fluid form in different parts of the body, obeying the laws of gravitation, producing œdema of the feet at night, and puffiness of the face and eyelids in the morning, the particular effects produced

by such accumulations of fluid being regulated by their quantities, and determined by the situations in which they are deposited. So that the patient may be destroyed by water in the chest long before she would have been exhausted by the disease itself. In some cases an alarming hemorrhage takes place, producing a state of syncope, from which the patient may not rally.

The late Dr. Clarke has remarked that he never met with a single instance in which the tumour, upon examination, was less than a blackbird's egg : this has been before accounted for ; it produces at first so few symptoms.

In many cases, too, the practitioner overlooks the disease, contenting himself with treating symptoms without thinking of their cause.

In one case which was attended by the late Dr Clarke and the author, the patient, a lady about forty years of age, lost her sense of vision a few days before her death.

No change in the appearance of the eyes was visible. It rarely happens that great emaciation attends the complaint, the patient being drained to death by the profuse secretion, or suddenly destroyed by hemorrhage, long before all her fat will have been absorbed.

On inspecting the bodies of several women, who have been destroyed by this disease, a layer of fat of considerable thickness has been found covering the abdominal muscles. How different this from the case of a patient destroyed by ulcerated carcinoma of the uterus, in whom scarcely a bone can be found, in which it is not as easy to see the form and processes, as in a skeleton! Yet, as in this complaint a discharge is present, as now and then it is foetid, as a tumour is found upon examination, and as the disease has always, sooner or later, a fatal tendency, it has been too frequently confounded with carcinoma. The prognostic, as to the *ultimate event*, it is true, must be the same; but the terms *sooner* or *later* admit of consider-

able latitude, and it is a great comfort to be enabled to lengthen life under such circumstances. It is not here, as in carcinoma, that whilst life is lengthened by art, distress and suffering is eked out with it. A patient labouring under the cauliflower excrescence may pass, nay, she may enjoy, several years of life, if she will be content to make some sacrifices.

As the enlargement of vessels in other situations is much influenced by pressure, so it will be found, that the compression of the sides of the vagina will greatly retard the growth of this tumour. Now, as the quantity of the watery discharge depends upon the extent of the surface of the tumour, and as the danger of the patient is in proportion to the quantity of the discharge, it follows that whenever the vagina has lost its tone, and the tumour has thereby been little subject to compression, the prognostic to be given to the friends of the patient, as to the probable duration of life, should be less favourable, than when the surface of the tumour is supported by

the sides of a more contracted canal. Added to this, the very pressure of a contracted vagina is an evidence that the constitution still possesses a considerable degree of vigour; so that the capacity of the vagina forms, in this, as well as in many other cases, by no means a bad criterion of the strength remaining in the constitution.\*

When the tumour occupies only a small part of the os uteri, the opinion to be given should be more favourable, than when the whole circumference of the opening is involved in the disease. The danger may also be increased by any violence inflicted upon the part, such as by the pressure of the child's head in labour; or by any in-

\* Thus in cases of great uterine hemorrhage in labour, the vagina will sometimes be so dilated as readily to admit the hand. Practitioners avail themselves also of the knowledge of this fact, in those cases of difficulty in labour, which depend upon a contracted and unyielding vagina. In this case the loss of a large quantity of blood by the lancet affords great relief to the patient, the vagina dilating afterwards so quickly that the labour is often very speedily terminated.



creased action going on in the vicinity, as by pregnancy. The symptoms in some cases of the disease are diminished more easily than in others, of which circumstance no knowledge can be obtained till the experiment has been made ; the greater the effect, therefore, which local remedies produce in controlling the discharge, the longer will the disease continue, *ceteris paribus*, without destroying the life of the patient.

*Treatment of the Cauliflower Excrescence.*

IF a woman labouring under the above disease is left to herself, or if the symptoms do not meet with attention, the tumour will increase in dimensions, and, partly by the perpetual watery discharge, and partly by the occasional attacks of hemorrhage, will shortly prove fatal.

The enlargement of the tumour will be greatly retarded, by diminishing the action and the fulness of the blood-vessels of the neighbouring parts. There is reason also to believe, that the size of the tumour will shrink under judicious management, which is more than can be expected in most instances of chronic morbid enlargements of the viscera, when the tumour is composed of more solid materials; and if the patient has the good fortune to take notice of the earliest symptoms of the complaint, it is probable that, by a steady perseverance

in that kind of management which will form the subject of this chapter, the farther progress of the disease may be put a stop to.

Local blood-letting is a most valuable remedy, and great reliance is to be placed upon it. The region of the sacrum and the hips may be scarified, and cupping-glasses afterwards applied; the quantity of blood to be taken away must be regulated by the size and degree of resistance in the tumour, and by the quantity of the watery discharge (which is always a measure of the extent of the disease), regard being paid at the same time to the strength of the patient. At the same time it must be recollected, that if, by the loss of eight or ten ounces of blood by cupping, the quantity of the watery discharge can be diminished from four ounces to two ounces daily, the patient will, at the end of a fortnight, possess more power than if she had lost four ounces of blood by cupping, and the quantity of the watery discharge had been diminished to three ounces daily.

By unloading the vessels of the tumour, they will also be less likely to burst spontaneously, in which case no estimate can be formed of the quantity of blood actually lost.

But, although local bleeding is so valuable a remedy in many cases, it may, when employed injudiciously, hurry the patient's dissolution. Great circumspection, therefore, is necessary in the direction of it. It should not be employed when much oedema of the feet is present, or during the continuance of any symptoms indicating great debility. Neither should blood-letting in any case be carried farther than is just necessary to produce the intended effect, particularly when it is considered that the art is in possession of many other powerful auxiliaries in curbing the progress of this malady.

If the patient should be a strong woman, and if the disease has not been of long duration, twelve or fourteen ounces of blood may be taken away: if she should

possess less strength of constitution, it may be sufficient to order the removal of six or eight ounces only ; and to repeat this once in three weeks or a month. The application of leeches is to be very little depended upon.

All general and local stimuli are to be carefully shunned, or the intention of the bleeding will be defeated. The diet should be of the mildest kind, such as puddings, white fish, or vegetables. Wine should be absolutely proscribed. If the patient should be married, she should be separated wholly from the bed of her husband, to which she should never return.

The state of the bowels should be carefully watched, and, if possible, they should be so regulated that the patient may have one motion daily, of such a consistence as will be voided without the least attempt at straining. This is a very important caution in many diseases of the uterus ; but in none does it deserve the same strict attention as in the cauliflower excrescence. The



author has known several instances where a profuse discharge of blood has followed the expulsion of a costive motion. Fruit taken before breakfast, honey eaten instead of butter, a little manna eaten with a few blanched almonds, or a tea-spoonful of electuary of cassia taken occasionally, will commonly obviate any inconvenience which may arise from costiveness. If a more powerful medicine should be required, the following may be tried: —

℞ Magnes. sulphat. ʒ vi.

Infus. rosæ ʒ iii.

Aquæ carui ʒ ii ℞.

Syrupi ʒ ℞.

Acid. sulph. dil. ʒ ℞. M.

Sumat cochl. ii. vel iii. mane quotidie.

The enlargement of the tumour may be greatly diminished, and the discharge consequently lessened, by the application of cold to the outside of the pelvis, and by the injection of cold fluids into the cavity of the vagina. Cold water may be applied to the external parts of generation, to the

pubis, and to the loins, by means of a sponge ; and this may be done, not once or twice only in the twenty-four hours, but several times : by keeping the parts in this manner constantly chilled, the blood-vessels will be contracted, and the advantages resulting from such a mode of treatment will soon be made evident, in the diminution of the quantity of the discharge, and in the improvement of the constitutional health.\*

The recumbent posture ought always to be insisted upon ; and the utility of it should be explained to the patient by familiar illustrations, as by adverting to the different size of the veins of the hand when held up and in a depending position.

All medical men at all conversant with human nature are well aware, that patients who will readily submit to an operation, or

\* Since the publication of the first editions of this work the author has had abundant reason to be satisfied with the effect of daily injections of cold water into the rectum ; a most valuable remedy in this and in other diseases of the uterus.

to a long continued course of medicine, will very reluctantly yield to any privation, or be governed by moral directions, the immediate tendency of which they do not understand.

The applications to be made to the tumour itself, with a view to cause contraction of its blood-vessels, and to influence the secretion from its surface, should consist of astringent substances in different forms, as may be best adapted to the variety of cases which occur.

In the history which has been given of the cauliflower excrescence, it has been observed that the tumour increases more rapidly in those cases where the tone of the vagina is the least, and *vice versâ*; so that the vagina acts in the same manner as a supporting bandage in varicose veins of the legs, or as pressure upon those tumours called *nævi materni*.\*

\* The author has not been so fortunate as Mr. Abernethy, in *removing* many of these congenital marks by pressure, although he has frequently retarded their

For the purpose of applying astringent fluids to the vagina, under ordinary circumstances, the common female syringe (vide Part I. plate) is sufficiently useful; but patients labouring under the cauliflower excrescence, as well as those in whom there is any abrasion of surface, should be very careful how they use this instrument.

A woman who had a cauliflower excrescence of the os uteri was very much weakened by the watery discharge attending it. The author recommended an astringent injection, which was used for some time, but afterwards discontinued in consequence of the patient observing that it always produced a discharge of blood: upon enquir-

---

growth by means of a compress and strips of adhesive plaster; but they have always returned when the pressure has been discontinued; and in many situations the parts beneath the nævus are not sufficiently resisting to allow of the pressure being carried to any great extent. Nevertheless the suggestion was worthy of the mind of that humane and intelligent surgeon, whose veracity has never been suspected, and whose integrity has never been shaken.

ing into the manner in which it was employed, it appeared that the pipe of the syringe was carried up so high as to injure the tumour, in consequence of which blood followed. A cylindrical syringe, the diameter of which is about three quarters of an inch, the extremity being rounded off, may be used for this purpose, and the patient should be cautioned not to introduce it farther than an inch or an inch and a half.

Even if the tumour should be touched with this form of instrument, it will be less likely to be injured by the diffused pressure made by so large a surface, than by the partial pressure caused by the extremity of a small one. The common female syringe may be used with less risk, if a handkerchief or a piece of linen is previously wrapped round it, at the distance of about two inches from its point.

In that aggravated form of the complaint in which the tumour nearly reaches the external parts, the patient should lie down upon a bed with her hips raised, and a



small quantity of the astringent fluid should be poured in between the labia; a common earthen butter-boat may be used for the purpose, and there can scarcely be found a better instrument. \*

When the tumour has actually protruded, compresses dipped in an astringent fluid may be applied, or the surface may be lightly touched with a soft sponge wetted with it.

A few formulæ of astringent injections applicable to this case are subjoined.

R   Zinci sulphat. ʒ i ʒ.  
     Aquæ rosæ, ʒ iv.  
     Aquæ distillat. ʒ xvi.     M.

R   Aluminis, ʒ iii.  
     Aquæ distillat. ʒ xv.  
     Mucilag. gum. acaciæ, ʒ i.     M.

\* Unless it be the covered boat which is used for giving medicine to children.

The addition of a small quantity of mucilage renders the application more useful, by enabling a portion of the fluid to be longer retained.

Or,

R Infus. lini,  $\bar{\text{z}}$  xv.  
 Aluminis,  $\bar{\text{z}}$  ii.  
 Tinct. kino,  $\bar{\text{z}}$  i. M.

R Cupri sulphat. gr. x.  
 Aquæ flor. samb.  
 Mist. camphoræ,  $\bar{\text{z}}$  vi. M.

Solutions of the mineral astringents in decoctions of astringent vegetables constitute applications possessed of great power ;  
 as,

R Cort. granat. contus.  $\bar{\text{z}}$  ß.  
 Aquæ distillat.  $\bar{\text{z}}$  xiii.

coque per sextam partem horæ et cola,  
 dein adde liquori colato aluminis  $\bar{\text{z}}$  ii.

R Gallarum, ʒ ℥.  
Aquæ distillat. ʒ xviii.  
coque ad ʒ xvi.

R Liquoris colati, ʒ xv ℥.  
Sp. roris marini, ʒ ℥.  
Aluminis, ʒ iii. M.

R Decocti quercûs, ℥ i.  
Tinct. catechu. ʒ ℥.  
Aluminis, ʒ ii.  
Zinci sulphat. ʒ i. M.

The efficacy of the latter formulæ in a great measure depends upon the tannin. As this principle has the power of coagulating albumen, so as to form an insoluble precipitate, it becomes necessary to prepare the patient for a circumstance which may otherwise occasion great alarm in her mind, —the appearance of thin, whitish, or ash-coloured flakes which will come away from

time to time. These are frequently thought to be portions of the body, and the agitation of the patient's mind has been very considerable, until it has been quieted by some explanation.

In some patients the membrane of the vagina is so irritable, that it will not bear the application of the mineral astringents. In such cases a mixture of decoction of oak-bark and linseed tea will form a less irritating lotion. The principles of management being laid down, the means must be variously modified, as the circumstances of each individual case may require, or as the skill of the medical attendant may suggest.

The foregoing directions have for their object the diminution of the expenditure of the powers of the frame; but those powers may require to be recruited; the disease may not have been discovered until great exhaustion of the strength may have taken place; and it will be necessary to have recourse to the employment of some light

tonic. The muriatic and the sulphuric acids are here very appropriate medicines. Indeed custom has so authorised the employment of the latter in cases of bloody discharges from the uterus, that they are frequently given by ignorant persons indiscriminately, blended in such a manner with medicines, possessing directly opposite properties, as to constitute inefficient, or perhaps very injurious, compounds. \*

\* In abortion, many practitioners do not allow themselves time to enquire what object they have in view: whether the accident is threatened by premature inordinate action of the muscular fibres of the uterus, or by a separation of a part of the ovum from the uterus; whether the ovum be living, and may remain, or whether it be dead, and *must* come away; whether the patient be strong, or whether she be weak. Whatever be the concomitant circumstances of the case, the only thing thought about is that a woman is miscarrying who ought not to miscarry; and this is the signal for the exhibition of sulphuric acid and infusion of roses, joined to laudanum; so that there is one ingredient, the sulphuric acid (a tonic), which increases the power of the muscular fibres of the uterus to expel its contents, and another ingredient, opium, the known effect of which is to take off the contraction of muscular fibres, with which view it is properly exhibited in the passage of a gall-stone, or of a piece of urinary calculus, and also in cases of strangulated hernia, to render the return of the intestine more easy.



R Acid muriatici, gutt. v.  
Aquæ distillat.  $\bar{z}$  i  $\bar{\beta}$ .  
Syrupi cort. aur.  $\bar{z}$  i. M.  
Fiat haustus ter die sumendus.

R Acid sulphurici, gutt. vi.  
Infus. rosæ,  $\bar{z}$  i  $\bar{\beta}$ .  
Aquæ carui,  $\bar{z}$   $\bar{\beta}$ .  
Syrupi,  $\bar{z}$  i. M.  
Fiat haustus ter die sumendus.

Sulphate of zinc may be usefully employed; but care should be taken not to exhibit this medicine so as to produce vomiting, which might be highly injurious, by accelerating the circulation. It should be given in combination with some essential oil, which will reconcile the stomach to its use, when it might otherwise disagree; and it will be found to agree better in substance than in solution.

R Zinci sulphat. gr. xv.  
Extr. humuli,  $\bar{z}$  i.  
Ol. cinnamomi, gr. iii. Misce  
diligenter, et divide in pilulas xv. æquales,  
e quibus sumat unam bis die.

Decoction of bark may form the vehicle for the acids which have been before recommended, or it may be taken in the form of draught after the pill.

R Decocti cinchonæ,  $\bar{z}$ i℥.  
Syrupi cort. aur. ʒi. M.

The author is justified in repeating, that by a strict attention to and compliance with the rules above suggested, nearly every case of this disease may be made more tolerable; and, perhaps, such a change wrought in the size or the actions of the excrescence, in a few instances, as to remove all the symptoms.

A lady, apparently about two-and-thirty years of age, (a friend of Mr. Cooke, a respectable surgeon at Brentford,) laboured under a continued profuse watery discharge, mixed occasionally with blood: her constitution appeared greatly weakened, she became very pale and emaciated, and, together with a slight degree of swelling of the ankles, she was liable to great palpitation

of the heart and shortness of breath. As her weakness increased, she sought relief from tonics and a stimulating diet, under which plan the disorder increased. An examination being made, a mass was found to project from the surface of the os uteri, from which a quantity of blood issued when it was pressed by the finger. Syncope took place in consequence of this discharge of blood, although the quantity was very trifling. The tumour had no regular form, and, as far as the author could ascertain, the whole of it could have been contained in half a walnut shell. The patient was desired to confine herself strictly to the sofa, to use cold water in a lavish manner to the pelvis, and to throw a strong astringent injection into the vagina; she was directed to give up the use of wine, to live upon farinaceous food and vegetable jellies, and to lose five ounces of blood from the sacrum by cupping, when she had recovered from the effects of her journey to the author's house.

Some weeks elapsed before the author again saw the patient; the watery secretion was considerably lessened, and the bloody discharge had entirely ceased: the ankles were no longer swelled, and the general health was improved. The patient was desired to repeat the cupping, and to continue the former system of management. Once in about six weeks or two months the author had seen the patient, who had followed up the same mode of treatment, occasionally losing some blood from the sacrum by cupping.

At the termination of about two years from the time at which the author first saw the patient, and after an interval of three or four months, she again called upon him, when, so great was the improvement in her appearance, that he hardly knew her. There had been no watery discharge during many months, and the menstruation, which had been interrupted by the weakness of the frame, had now become perfectly regular; the only medicine which had been taken

during the latter part of this period was half a drachm of pulv. cinchonæ twice a day. As the case was altogether a very extraordinary one, it became very desirable that an examination should be made. The vagina was so much contracted by the continued use of the astringents, that it admitted the finger with difficulty ; on carrying the examination farther, no difference could be felt between the os uteri of the patient and that of a woman in perfect health. Such are the facts of this case : in reviewing it, every one conversant with diseases of the uterus must acknowledge that it was very extraordinary in its termination. No mystery of treatment hangs over it ; very little medicine was given, except what has been mentioned : a few grains of hyoscyamus or conium to allay irritability, a little Epsom salt to regulate the bowels ; and when little else than weakness remained, a few drops of tincture of muriated iron twice a-day. To the local blood-letting, the horizontal posture, and the use of astringents, then, must be attributed the removal



of this disease, which had all the characters of the cauliflower excrescence.\*

A lady, about forty years of age, who was a patient of Mr. Tegart, was much reduced by a perpetual drain of a watery humour from the vagina. Whenever she took exercise, blood came away mixed with the other discharge. The skin of the patient was perfectly blanched: until she fell under medical management, she had eaten meat, and drank wine, suspecting that the weakness of constitution produced the discharge.

An examination was made, and, as was expected, a cauliflower excrescence was found as large as a hen's egg: similar means to those recommended in the former case were employed, and with a similar diminution of this discharge.

The patient now thinking herself reco-

\* Twelve years have now elapsed since this patient first consulted the author: no symptom of disease is present, and the parts remain healthy.

vering, determined, against the advice given to her, to go into the country. The motion of the carriage, during a journey of sixteen miles, produced hemorrhage, which continued; and the patient was thankful when she found herself again upon the sofa in London. Aware of the imprudence of having made the experiment, she then became rigidly attentive to all the rules laid down, which had for their object the intentions contained in the description of the treatment of this disease. The discharge greatly diminished; during the space of several weeks there was no loss of blood; the patient has been allowed to take a little light animal food, and a small quantity of claret; and there is reasonable ground for hope that some favourable change has taken place in the tumour, either as to the membrane which covers it, or the blood-vessels which compose it.

In some instances of patients who labour under cauliflower excrescence all the resources of the medical art are futile; no check can be imposed upon the discharge

by astringents, however powerful as to strength : still, even in such cases, the ligature holds out a prospect of relief, which has now and then been realized. The diseased surface of the os uteri may, and probably will, regenerate the fungus ; but a considerable length of time may elapse before a tumour of a large size may form ; and in the interim, by the removal of the secreting surface, the discharge will be restrained, and time will be afforded for the powers of the woman to be recruited.

A case has been related where the utility of such a mode of treatment has been proved in the person of the widow of a physician at Bath.

The operation is the same as that recommended for polypus of the uterus, and described in the first volume of this work. More care is required in applying the ligature round the base of a cauliflower excrescence than round the neck of a polypus, because the cauliflower excrescence is so

likely to bleed upon the least rough treatment.

The shield which the author recommended to be attached to the polypus canula, is not so neccessary in performing the operation for this disease, because the tumour will be cut through in a much shorter time, and it will hardly be necessary to tighten the ligature often. The objection to the use of the shield in this operation, is the possibility that the weight of it may tear through the tumour, before the blood has coagulated in the vessels above.

After the removal of the disease, it is recommended that the vagina should be washed out with cold water, and that a solution of alum in a strong decoction of oak-bark should be thrown into the vagina twice or three times a day, the external orifice being blocked up with a dossil of lint, so as to prevent the too sudden escape of the fluid.

A weak solution of nitrate of silver, or of sulphate of copper, may be preferable in some cases to any other injection: it may be used in the following proportions:—

R Argenti nitrat. gr. xii.  
Aquæ distillat. ℥ xii.

or,

R Cupri sulphat. gr. xviii.  
Aquæ rosæ, ℥ xii.

In some cases it may be useful, especially when the vagina is irritable, to introduce a piece of lint wetted with this solution into the vagina, and to carry it up to the diseased part of the os uteri. By such means a slight degree of inflammation may be excited in the blood-vessels, so as to produce a consolidation of the parts diseased; and thus the regeneration of the tumour may be more tardy.

However favourable appearances may be in that part of the uterus which can be



examined by the finger, there may exist out of reach, and consequently without the knowledge of the practitioner, morbid changes of structure, which may of themselves prove fatal.

## HYDATIDS OF THE UTERUS.

IN the cavity of the uterus small vesicles containing a limpid fluid are sometimes met with, constituting the disease called Hydatids of the Uterus. These vesicles vary considerably in size, from that of a small currant to that of a large grape. They are connected with the uterus, and with each other, by small filaments; and portions of a substance resembling partly blood, and partly coagulating lymph, are frequently mixed with them. A similar substance is attached to the internal part of the uterus, from which the footstalks of the hydatids grow. As the number of these hydatids increases, the cavity of the uterus becomes more capacious; and when, at length, the uterus has acquired a large size, it seems to be offended by its contents, and contracts upon them.

The cause of this complaint has not been ascertained: it sometimes appears as a

morbid condition of the opaque membranes of the ovum ; and, in such cases, interfering with its functions, it destroys the vitality of that body, and thus produces abortion.

It is probable that the existence of pregnancy is not necessary for the production of this disease ; it has been believed to exist independently of this state ; and perhaps a morbid condition of organized coagulating lymph may have the power of originating this disease under certain circumstances, but what these circumstances are, is not known. Hydatids are met with in other parts of the body, but no very probable conjecture has been offered for their production. In many cases these vesicles possess a power of contraction ; but whether this power has ever been observed in the hydatids of the uterus, the author does not know ; he believes that it has not. It may admit of a doubt whether, in consequence of a morbid condition of the ovaria, some separation of the corpora Graffiani may not induce the complaint. It has been suggested, that diseases of the

ovaria may originate in consequence of the excitement of the genital system, and the opinion seems to be entitled to some regard.

Hydatids of the uterus do not appear to produce any peculiar symptoms, with the exception of one form of the disease to be mentioned hereafter. The greater number of the inconveniences attending the disease arise out of the pressure made by the enlarged uterus upon the circumjacent parts, such as retention of urine from compression of the meatus urinarius ; constipation of the bowels from compression of the rectum ; cedema and cramp of the lower extremities from pressure upon the trunks of absorbents and upon the sciatic nerve. These symptoms, however, are not necessarily present ; and instances have occurred in which they have been altogether wanting.

When the cavity of the pelvis can no longer contain the enlarged uterus, that viscus will rise into the cavity of the abdomen, and may be felt as a circumscribed tumour through the parietes.

The function of menstruation is usually interrupted. This might be expected upon the supposition that the complaint was a disease of pregnancy: but it will probably be found that, whenever the mucous membrane of the uterus is disposed to throw out an opaque membrane, resembling coagulating lymph, (such as the decidua in pregnancy, or those flakes which are separated in painful menstruation,) the secretion of the menstruous fluid is interrupted. In painful menstruation, during that period at which such flakes are separated, the secretion is very scanty; but after these flakes (which sometimes form perfect casts of the cavity of the uterus) have been separated, which usually happens about the second day of the period, the menstruation becomes more abundant.

In the examination of a patient labouring under hydatids of the uterus, the body of this viscus will be found enlarged, and suddenly bulging out from the upper part of the cervix. All these symptoms attend other enlarged states of the uterus; but



there remains to be mentioned one other symptom which serves to distinguish this disease from all others, and from pregnancy, — and this symptom is the discharge of an almost colourless watery fluid. This watery discharge is to be distinguished from that which attends the cauliflower-excrecence, by the irregularity and suddenness of its appearance and cessation; being produced by a rupture of one or more of the coats of these hydatids, in consequence of the occasional contraction of the uterus upon them, or by any sudden violence, as in the act of coughing or sneezing; whereas the discharge from the cauliflower-excrecence, being a secretion from its surface, is constantly escaping. The fluid watery discharge may be distinguished from those splashes of urine which sometimes come away from pregnant women, by being wholly inodorous.

In some cases, the size of the uterus increases rapidly, in others slowly; but in all, sooner or later, the parietes of the uterus,

being irritated by the distention of the cavity, are excited to contraction.

From this period of time, a process resembling labour commences; the os uteri is dilated; the hydatids are expelled by periodical pains; and then, for the first time, danger presents itself in the form of alarming hemorrhage. This hemorrhage is more frightful than that which follows the removal of the placenta from an uncontracted uterus; and the reason is obvious; the placenta covered only a limited space of the internal surface of the uterus, whereas the hydatids spring from every portion of the cavity.

No means have been hitherto discovered of curing this disease artificially, or of arresting its progress towards its natural termination. The patient is to be informed of the nature of this disease, and the event is to be patiently waited for. As symptoms arise, they are to be treated as their nature demands; and the practitioner will best perform his duty by watching over the

complaint, and by doing no more than is absolutely required. But when the period arrives at which the uterus is striving to unload itself of its contents, then all his skill and energy will be wanting, and all his efforts will be called forth to control the hemorrhage, and to sustain the powers of the constitution. With this view the patient should be kept perfectly quiet in the horizontal posture ; she should not be allowed to take any stimulating food, or drink. Cold applications, such as cloths dipped in vinegar and water, or in iced water, are to be made to the loins, abdomen, and external organs ; and portions of ice (their acute edges being rounded off by being held in the hand) may be introduced into the vagina, or into the uterus. Let it not, however, be forgotten, that the great remedy for uterine hemorrhage is uterine contraction, and every possible mode of exciting this is to be put in practice. The application of a bandage round the abdomen has sometimes the power of exciting this contraction ; but if the hemorrhage should continue profuse, and if any portion

of the hydatids should remain in the uterus, an attempt should be made to remove these, in order to produce complete contraction of the muscular fibres.

Two or three fingers, or the whole hand, should be covered with pomatum, and carefully introduced into the uterus, and carried up between the sides of the uterus and the hydatids, which are to be detached from the part to which they adhere by the most gentle efforts. The mass being now included in the hand of the operator, is to be brought out of the uterus, the surgeon recollecting always, in the performance of this operation, that the degree to which the os uteri is dilatable without laceration, is in proportion to the size of the whole uterus, both in pregnancy, as well as in this disease. So that, supposing the uterus in this disease to be enlarged to the size of that viscus in the sixth or seventh month of pregnancy, the whole hand of the operator may be, if necessary, introduced through the cervix ; whereas, in smaller dimensions of the uterus, if any attempt is made to in-

troduce the whole hand through the cervix, however carefully it may be attempted, a laceration of it may ensue, and thus the patient may be involved in a new danger.

The contents of the uterus being naturally expelled, or artificially removed, and the hemorrhage being thus restrained, the strength is to be restored, by allowing the patient a nutritive diet, and by the exhibition of such medicines as tend to increase the tone of the system ; amongst which the mineral acids and cinchona may be accounted the most serviceable : these, or other medicines possessing similar properties, should be from time to time exhibited, until the vigour of the system shall have been entirely restored.

The usual cautions given to women after delivery should be here impressed upon the patient, such as confinement to the horizontal posture until the uterus and the vagina shall have acquired their usual size and tone.



There is another variety of hydatid of the uterus, in which the uterus is distended by one single cyst and its contents to an enormous size. The author has never seen an instance of this form of the disease; but it appears, from the accounts given of it, that the symptoms are all purely mechanical. Although the uterus may be equally and greatly enlarged, it will be difficult to determine whether such increase of bulk is produced by a single hydatid, or by a deposit of solid matter in the substance of the uterus. The fluidity of the contents of the tumour does not necessarily cause a sensible fluctuation of these contents. A full bladder felt above the pubis does not give to the hand the sensation of a fluid being contained within it. The discharge of a watery fluid in large quantities is, in this variety of the disease, the first announcement of the existence, and the presage of its speedy removal.

The water having escaped, the cyst is expelled, and the disease is terminated without the occurrence of any of those

distressing symptoms which threaten the patient's life, in the disease first described. The abdomen of the patient will require the support of a bandage.

This last variety of the uterine hydatid is a very uncommon disease; so that the practitioner will hardly be prepared for its occurrence. The patient will, therefore, probably be led to expect a disease of long continuance, and will be agreeably surprised to find her complaints terminated so expeditiously.

Fleshy tubercle of the uterus, being a disease of slow growth, and offering to the finger, in an examination, a considerable degree of resistance, may perhaps be readily distinguished from the single hydatid; but after all, it is only with a view to the prognosis, that the discrimination between them is at all important; the symptoms which arise in both of them admitting of similar modes of relief, — fulness of the bladder by the use of the catheter, constipation by the employment of those purgatives which are

found to diminish the consistence of the fæces, and pain arising out of pressure, by the administration of conium, hyoscyamus, and other sedatives.

As watery depositions are found to take place into different internal cavities, constituting dropsies of such parts, as of the thorax, abdominal cavity, &c. ; so it has been supposed that a similar circumstance may take place into the cavity of the uterus, which has been mentioned by many writers under the title of dropsy of this viscus. The uterus, however, possessing an opening at its lower part communicating with an external outlet, it is difficult to understand how any accumulation of fluid can take place within it ; for although the sides of the cervix uteri may be agglutinated by its proper mucus, or by adhesion in consequence of inflammation, such an occurrence is not very likely to take place ; and even if it did happen, a deposit of watery fluid into its cavity would be an extraordinary concurrent circumstance.

It is more than probable that the cases described as dropsy of the uterus have belonged to the class of hydatids ; or if there be any such disease, in fact, as dropsy of the uterus, the author has never met with a case of it.

## THE OOZING TUMOUR OF THE LABIUM.

THERE is yet another disease attended by a watery discharge, to which the writer has given the above name. In the first part of this work a description has been given of warty tumours of the labia, and of the vestibulum ; but there is no similarity between those diseases and the tumour now under consideration. In the warty tumour there is an increase of the mucous discharge from the vagina, arising simply from the increased circulation ; but in the oozing tumour of the labium, the discharge arises from the surface of the tumour, or rather from interstices in the tumour. The fluid which escapes is of a watery character, and it is sometimes very abundant in quantity, being renewed almost immediately after the surface has been made dry by a napkin.

The author has never known blood to escape from this tumour, even when roughly



handled, so that the complaint is not by any means analogous to the cauliflower-excrescence. Moreover, when removed from the body, the oozing tumour retains its form and firmness, which the cauliflower-excrescence does not.

The tumour sometimes is so large as to leave scarcely any part of the labia free from it, and to extend to the mons veneris. It seldom projects far above the plane of the surrounding skin, often not more than a line or two, and rarely above one third of an inch.

The colour of the tumour varies little from that of the cuticle of the neighbouring parts; and a projection, very much resembling it, might be made by the firm application of a piece of fine netting to an œdematous part during a few seconds; the surface being unequal, consisting of irregular depressions and eminences, from the former of which the fluid oozes. In the immediate neighbourhood of the tumour œdema is occasionally met with, but the

tumour itself is not oedematous ; soon after the surface of the tumour has been wiped quite dry, a watery fluid begins to ooze from it, and to form drops, which, having become large, at length run off, and keep the surrounding parts in a state of constant humidity ; sometimes soreness and excoriation take place, as upon the upper lip, when the secretion from the nostrils is increased, but the tumour itself is seldom rendered more sensible.

The secretion from this tumour corresponds in appearance with that from the cauliflower-excrescence. Its quantity may be influenced by a variety of circumstances, but it always bears a proportion to the extent of the disease. In damp weather, and in debilitated states of the system, it will be found more abundant than when the atmosphere is dry, and the constitution vigorous. It will be seen hereafter that it is controllable by art. The disease having once begun, continues to enlarge, and insulated patches of it appear in the neigh-

bouring parts, so that at length they will be found to run into each other.

At first sight the complaint may be mistaken for that form of erysipelas which is denominated shingles; but, upon a more careful inspection, it will be found that the projecting parts are solid, and that they do not, as in the disease called shingles, contain a fluid. The trifling degree of vitality which the labia in some cases possess, renders them liable to attacks of erysipelas, and therefore the practitioner should be careful in discriminating between the two diseases.

In women who are fat and weak (by no means an uncommon combination), the cuticle will sometimes peel off between the labia and the nymphæ, and between the labia and the thighs, and an oozing will take place until a new cuticle shall have been formed; but there is little chance of any mistake in this case. The latter circumstance is very usual; the oozing tumour of the labium of rare occurrence.

Fat women are the most frequent subjects of the oozing tumour of the labium, especially if they have borne many children, or have had their constitution much impaired. In such habits the complaint seems to arise spontaneously, or at least the author is ignorant of the cause producing it.

Within the author's knowledge, the complaint does not attack young women; indeed he has never met with it, unless in that bulky state of the labia more common after middle life.

It is more than probable that many women labour under the disease without making it the subject of complaint; and amongst those who do ask advice respecting it little regard is paid to it, unless the neighbouring parts have been much excoriated, or considerable weakness produced by the discharge.

In one patient, a poor woman, who owed much to the kindness of the late Dr. G. G. Currey, so much inconvenience and general

distress was caused by the disease, that after she had been confined during some months in the hospital in the Borough, and had afterwards received no benefit from the author, she consented to have the labia themselves removed, and thus the disease was cured.

When the structure of a part has been greatly altered, or when the vital energy of it is greatly exhausted, a disease forming in its substance is not capable of being cured by the ordinary resources of art : no applications of any kind having the power of reproducing, and maintaining healthy actions. Stimulants may excite ; pressure may control growth ; but a relaxation in the employment of the means is followed by a return of the malady. How often this is the case in old ulcers of the legs is to be found in the experience of every surgeon.

The labia, being endowed with feeble powers of life, become liable to some irreparable alterations of structure. The oozing tumour attacking one labium sometimes produces irritation upon that of the opposite



side; but in no other way than any extraneous body similarly situated would do.

The chief inconveniences of this disease are, itching of the parts, sometimes a preternatural sense of heat, and a watery discharge; which, if it should be considerable, may greatly annoy, or even weaken the patient. Relief is seldom sought for in these cases until the disease has acquired a considerable size, and even then it would probably often be concealed, unless the apprehensions of the patient were called forth.

When excoriations of the neighbouring parts are present, or an erysipelatous blush appears upon them, more advantage will be derived from the internal exhibition of the cinchona in substance, than from any other medicine; but no impression will be made upon the disease itself by this valuable remedy, and even the symptoms above mentioned will frequently recur, and call for the employment of the same remedies.

As it has been observed that in most instances the *vis vitæ* is impaired, the patient should be desired to live upon a nutritious diet, and to take a moderate quantity of wine.

As heated rooms and warm seats will always aggravate the symptoms, they should be avoided.

Much good may in many instances be done by external applications; by several the discharge may be greatly controlled, and even cease for a time; the vessels which exhale the fluid having their orifices either clogged up or strengthened, so that less fluid is poured out: but the writer has never known the disease cured by them, or even diminished in size.

Common starch-powder sprinkled upon the parts again and again, so as to form a cake upon them, is a very efficient remedy; but it will be necessary to keep the patient in the horizontal posture during its use; the recumbent posture itself has in all cases an influence upon the discharge, even when

no application is made to the parts themselves.

A mixture of starch-powder and cupri sulphas, very finely levigated, has been found serviceable; or a solution of cupri sulphas, or of argentum nitratum, may be used. A solution of gum arabic in decoctum quercûs may be tried. Cold water is also a valuable remedy, and there are no cases in which it will not afford much temporary comfort.

Perhaps of all the preparations which may be suggested, none is so effectual as alcohol. Strong new port wine has afforded great relief; but, when this has failed, brandy, or arquebusade, may be employed, and even alcohol will be useful when the weaker spirits are in no respect beneficial in controlling the discharge.

Although the author has made use of the terms "frequently," and "in several cases," he wishes it to be understood that he has had but little experience in this disease, which he considers as one of the

most uncommon complaints affecting the organs of generation in women. The author has never seen the oozing tumour in the scrotum or prepuce of men, or upon the skin in any other part of the body.

In one instance the writer has removed the labia at the earnest solicitation of the patient.

A woman, about forty years of age, who had been in St. Thomas's hospital on account of this disease, applied to Dr. G. G. Currey, who referred her to the author. A variety of applications were made to the parts, some with a little advantage, others with none at all ; and at length, the poor woman being very anxious to get rid of her disorder, a lodging was provided for her, and the labia were removed by the scalpel. The sores granulated and healed without any trouble, and the patient got perfectly well. Such a remedy should hardly be advised until all other means of relieving the patient have been tried without effect ; nor even then if the inconveniences are at all sufferable.

## INVOLUNTARY DISCHARGES OF URINE.

IN investigating the complaints attended by watery discharges, the nature of the discharge itself should always be subjected to examination. It may happen that they may consist of urine alone, which, in the adult, may always be distinguished from every other watery discharge by the peculiarity of its smell, especially when the cloths upon which it has been received have been dried. The passage of urine over the labia, and over the skin covering the inside of the thighs, will also produce heat, redness, and inflammation of those parts; circumstances less frequently attending the other watery discharges.

Involuntary discharges of urine from the bladder may be either constant or occasional, and they may exist with or without destruction of parts. These cases become



distressing, because they render the patient very uncomfortable, and sometimes lay the foundation of troublesome ulcerations in the parts over which the urine passes. The space allotted to the bladder in a healthy state of these parts, is the cavity of the pelvis ; and, as the bladder becomes full, it rises into the cavity of the abdomen. If the pelvis and the cavity of the abdomen should be encroached upon by any large tumour, there will be no space for the reception of the full bladder ; and therefore, at the close of pregnancy, and in other kinds of enlargement of the uterus, the bladder will be capable of containing small quantities of urine only ; and, lying between the uterus and the recti abdominis, it will be acted upon by every sudden and strong contraction of these muscles, and a part of its contents will be expelled, as in coughing, laughing, straining, &c. For this case there is no remedy. Flat sponges sewed into the folds of a napkin should be constantly worn ; and if the urine should have stimulated the neighbouring parts, they may be defended from

its action upon them by being smeared with the following cerate :

R

Ung. cetacei, ℥ij.

Emplastr. plumb. ℥ii. M. fiat ceratum.

In consequence of age, and sometimes from other causes, the neck of the bladder and the meatus urinarius will sometimes have so entirely lost their tone, that the urine will flow away as fast as it is secreted by the kidneys, forming a constant discharge. If, however, the patient remains perfectly still, lying at the same time upon her back, the bladder will be enabled to retain several ounces of urine. This loss of tone may be total, or partial only; in which latter case the urine will not escape, unless upon the employment of some slight exertion.

An examination should first be made of the parts by means of the catheter, in order to ascertain whether any communication

exist between the neck of the bladder and the upper part of the vagina; if no such communication is found, the cause of the malady is to be farther investigated. If general debility or a tedious labour should have produced the disease, relief is to be sought for in those remedies which give local and constitutional strength. Large quantities of cold water may be dashed against the parts twice or thrice daily, and the use of the cold bath may be recommended. Decoction of bark and the mineral acids may be employed three or four times daily; and if these should not produce any good effect, advantage may be taken of the knowledge of the occasionally injurious effects produced on the neck of the bladder by the exhibition of the cantharis; and this remedy may be cautiously exhibited twice or three times daily. The tinct. lyttæ of the present pharmacopœia being a good preparation of this medicine, it may be given in the quantity of twenty drops, and the dose gradually and cautiously increased: blisters may also be applied to the neighbourhood of the sacrum, or of the pubis.

Electricity may also prove a serviceable remedy, and should, therefore, not be withheld. Discharges from the Leyden phial may be passed through the pelvis, from before to behind. Should all these plans fail of producing a good effect, recourse may then be had to the employment of those means which, by compressing the urethra, may produce a retention of the urine; and here the mechanical talents of the surgeon may be profitably employed. The introduction of a globular pessary of a large size into the vagina may, by its pressure against the back part of the meatus urinarius, effect the intended purpose; and, when the bladder becomes full, the pessary may either be removed by means of a noose of silk attached to it, or if the patient should have any difficulty in accomplishing this, it may be pushed backwards by the finger introduced on one side of the ossa pubis; or the patient may be instructed in the method of introducing a catheter. The globular pessary in this case is thus made to produce the same effect, which the pressure of the child's head in

labour occasionally and accidentally causes. In some cases it may be advisable to construct an instrument, consisting of a small steel spring (in a manner similar to that used to confine letters), to cover it with soft leather, and to introduce one part into the vagina, so as to press upon the back part of the meatus, whilst the other end of the spring lies upon the anterior part of the ossa pubis. By such a contrivance, the strength of the spring being properly regulated, the urethra may be so compressed as to prevent the perpetual discharge of the urine, and the patient may be enabled to remove or to apply it as the state of the bladder may render necessary.

The most distressing case of involuntary discharge of urine is that which is produced by the existence of a communication between the posterior part of the neck of the bladder, and the anterior portion of the vagina. This state of parts may have been produced by violence at the time of labour; or by the long continued pressure of the child's head, in cases where artificial means



of delivery had not been timely resorted to ; and there are few inconveniences to which the human body is liable greater than this : but if the destructive ulceration of carcinoma should have spread itself towards the bladder, pitiable, indeed, will be the state of the patient ; for, in addition to the misery attending such communication, there will be present the excruciating pain of this disease. When ulceration is actually present, and extending itself, little assistance can be afforded to the patient ; but when the mischief has arisen from laceration or sloughing, it may be worth while to introduce into the vagina a large thin globular pessary, made either of wood or (which is better) of silver, perforated by a great number of holes, capable of containing a large piece of sponge. At the lower part of this pessary there should be a circular opening, through which sponges may be removed occasionally ; and for this purpose a piece of string may be attached to the sponge, which, being emptied of the urine contained in it, may be again introduced into the cavity of the pessary, with-

out the removal of it from the vagina. Both women and men, liable to incontinence of urine, should take especial care to drink small quantities of fluid only; and the surface of their body should be kept warm, in order to diminish the determination of blood to the interior, as it will be found that such patients are less distressed by their disease in summer than in winter, which is explicable only on this principle.

## CHAP. III.

## ON THE PURULENT DISCHARGE.

THE characters of this discharge are a heavy, yellowish, opaque fluid, possessing little tenacity. With the exception of a few cases, the quantity of it is seldom very profuse, and never so considerable as that of the watery discharge; and yet the secretion of pus is sometimes the cause of so great a degree of debility, that the powers of the constitution are quickly expended, of which a variety of instances are to be met with in different parts of the body; perhaps, large purulent secretions may be equally injurious to the frame, with evacuations of blood in similar quantity. Pus may be secreted by membranes in a state of inflammation, and also by ulcerated surfaces; and in the former case, when a part of a membrane is disposed to pour out this fluid, the inflammation which produces it

spreads usually to the continuous parts of the same membrane. So long as the disease exists without any breach of surface, pus alone, or mixed with mucus, is secreted ; but when pus is secreted by an ulcerated surface, the least violence will cause an admixture of blood with the pus ; or, no violence being inflicted, the act of absorption alone will not uncommonly expose bleeding vessels ; so that the fluid discharged will be a mixture of pus and blood : and this becomes a tolerably fair criterion, as to whether the pus is secreted by a membrane in a state of inflammation, or by an ulcerating surface. The irritation arising from the long continued residence of an old pessary in the vagina produces a purulent discharge, and sometimes a discharge of pus mixed with blood ; but, in this latter case, if there is no other disease present, it will be invariably found, that ulceration of the vagina has been produced by pressure ; and the finger of the practitioner introduced into it will be capable of detecting inequalities and depressions on its surface.

As many cases of purulent discharge are thus attended by a mixture of blood, it will be impossible to make a nice distinction between them. It is the intention, therefore, of the author to describe first the cases of purulent discharge appearing to arise from the mucous membranes of the female organs of generation in a state of inflammation, and afterwards to point out those other cases in which the pus is secreted by an ulcerating surface, it being occasionally mixed with blood.

Mucous membranes in different parts of the body are liable to different degrees of inflammatory action. In some the appearance will consist simply of an enlargement of the blood-vessels of the part. This enlargement, arising from the distention of the vessels, may continue for a considerable length of time, and at length the inflammation may retire, the symptoms gradually subsiding, and no other action taking place; an example of which is frequently found in inflammation of the tunica conjunctiva. Another mucous membrane, tak-



ing on inflammatory action, will be attended by a great secretion of mucus, as the *membrana Schneideriana*; although, sometimes, pus may also be secreted by it, but this occurrence is rare. The mucous membrane, which lines the trachea and the cells of the bronchiæ, when inflamed, is sometimes attended by an extravasation of coagulating lymph, as in the disease called croup; whereas, in others, it will secrete pus, which will be expectorated in large quantity. The mucous membrane of the intestines, when inflamed, as in dysentery, will separate from its surface tubular flakes of coagulating lymph, and but in few instances will pus be secreted. The mucous membrane, by which the vagina, the cavity of the uterus, and the Fallopian tubes are lined, seems to be very differently affected during the existence of inflammation. In the two latter cases, coagulating lymph is almost always extravasated, when the inflammatory action is violent. In painful menstruation, (or inflammation of the mucous membrane of the uterus,) flakes of coagulating lymph are almost

always thrown off; in some instances possessing an irregular shape, in others forming accurate casts of the cavity which gave rise to them: and it has happened, when the inflammatory action has extended itself to the Fallopian tubes, that casts of their cavities have also been voided; sometimes in detached portions, in others connected with the superior angles of the triangular portions of the same substance, which lined the cavity of the uterus. In a case of a young lady, under the care of the late Dr. Reynolds and the author, a considerable number of these casts of the uterus and Fallopian tubes was voided during the space of twenty-four hours. Sometimes, however, the mucous membrane of the uterus, being inflamed, will secrete pus; and, probably in many cases, this fluid will escape from the vagina, it being doubtful whether it was formed by the uterus, or by the vagina. In other cases of inflammation of the membrane lining the uterus, a retention of the pus secreted will be produced, in consequence of the adhesive inflammation having attacked the lining

membrane of the cervix uteri, so as to obliterate its cavity. The mucous membrane of the vagina, when under the influence of inflammation, rarely gives rise to the production of layers of coagulating lymph; but a very slight degree of inflammation will excite purulent secretion. Pus, sometimes, also escapes from the meatus urinarius in women, either gradually, or mixed with the urine. In the first case, it is probably secreted by the membrane of the meatus; in the second, by the bladder.

*On Inflammation of the Mucous Membrane of the Uterus, terminating in Secretion of Pus.*

IN this case, when the pus secreted can readily find its way into the vagina, few symptoms will be found to exist excepting heat and uneasiness experienced in these passages ; and, as the fluid escapes out of the external parts, it may be doubtful whether it was secreted by the vagina or by the uterus. In some cases, however, the vagina is wholly free from inflammation. At the commencement of this disease the patient is attacked by pain of an acute kind in the back, and at the bottom of the abdomen. The constancy of this pain is as great as its severity ; and its continuance inducing the practitioner to make an examination *per vaginam*, he finds the uterus tender to the touch, and its bulk increased, resembling the viscus when in a state of impregnation ; the parietes of the

uterus gradually yielding, its bulk becomes very considerable. In some instances the disease is ushered in by a violent attack of shivering followed by great heat. Still, however, from the unusual occurrence of the disease, the true nature of the case is involved in conjecture, until the occurrence of another symptom, which unravels the mystery. Suddenly, a burst takes place, the patient being sensible that something has given way within her: and a large quantity of pus of a very offensive odour escapes, when the symptoms are immediately relieved. During some days small quantities of pus are evacuated, and at length the patient returns to health. If an examination of the uterus be made after the discharge of the matter, it will be found greatly reduced in bulk.

An unfavourable opinion is usually formed of these cases in their progress; the practitioner fearing, and with reason, that some important morbid alteration of structure in the uterus is taking place; under this impression, (the prognostic



leaning to the unfavourable side,) the termination of the case, in the manner above described, is an agreeable surprise to the subject of it. And, although the practitioner may derive credit for the management of it, to which, notwithstanding, he is not entitled, an impression will be left on the mind of the patient unfavourable to his skill in the art of prognosticating.

The duration of this disease will depend upon the degree of the inflammation, and upon the disposition which exists in the sides of the uterus to yield to the distention. The retention of the matter in the uterus may be produced either by the adhesive inflammation taking place between the sides of the cervix uteri, or by the glands in its neighbourhood secreting a tough mucus, filling up its cavity as in pregnancy; or by a great degree of contraction of the cervix uteri itself.

On the 12th of January, 1812, the late Dr. Clarke visited Mrs. A. B., about sixty-five years of age, who had ceased to men-

struate many years. A few weeks before he saw her, she had informed Mr. Brande, who attended her, of a small sanguineous discharge from the pudenda. The discharge was not attended by any pain ; but as she was rather heated, he gave her occasionally some sulphate of magnesia in infusion of roses, from which she considered that she experienced relief. After this she had, as she informed Dr. Clarke, a trifling discharge, at first like fluor albus, but which afterwards became of a brownish colour, offensive to the smell, and greater in quantity. A very short time before Dr. Clarke saw her, she had experienced a more considerable sanguineous discharge, but without any pain. She readily agreed to an examination *per vaginam* ; when the os uteri was found ragged, and much harder than usual. The cervix was of the common length, but was hard to the touch. From the upper part of the cervix a tumour bulged out in all directions, so as to occupy nearly the whole space from the os pubis to the os sacrum.

No urgent symptoms were present; but towards the end of the month the patient sent in haste to Mr. Brande, to whom she stated, that she had been suddenly seized with violent pain in the lower part of the abdomen, attended by a sensation as if something had suddenly given way there, and that she was still in great pain. She had passed her urine at four in the morning. After the attack of pain, however, she could pass no more; but had a frequent desire, attended with uneasiness, to empty the bladder. She was now in a state of extreme weakness and faintness, having a small thread-like pulse, and the extremities being cold. Cordial remedies being administered, the pulse was improved, and the state of faintness diminished. About half a pint of urine was drawn off from the bladder, and the patient became more easy. In the evening of the 31st of January, the patient died, having retained the faculties of her mind nearly to the last. The body was examined; and on opening the abdomen, about seven or eight ounces of a most offensive purulent fluid were

found in its cavity. When this was cleared away, the part of the small intestines, which presented itself, showed very strong marks of preceding inflammation. On raising the intestines to expose the contents of the pelvis, a tumour appeared in a gangrenous state, with an opening in the upper part of it, through which, on the slightest pressure, a quantity of offensive pus issued, similar to that which was found in the cavity of the abdomen.

About five ounces more of matter were removed from the bag which contained it, and which was afterwards discovered to be the uterus in a distended state. Both its external and internal surfaces were of a dark colour, exhibiting nearly the appearance of a mortified part. On the internal surface there was an appearance like half-coagulated lymph, but there were no traces of any cyst; so that the fluid was contained in the cavity of the uterus itself. The internal surface of the uterus had a honeycomb-like appearance. The orifice between the cavity and the cervix was closely con-

tracted, so as not to have allowed the contents of the uterus to be discharged through it.

The above case proves that matter may be retained in the cavity of the uterus by a contraction of the cervix uteri alone ; it being stated, in addition to the above history, that a probe could be readily passed from the vagina into the cavity of the uterus after death.

Eight or ten years ago, the author was consulted respecting a patient, about forty years of age, who laboured under symptoms of inflammation of the uterus. It is hardly necessary to detail all the particulars of this case. It may be sufficient to state, that the inflammatory symptoms ran very high ; and that, on examination, the uterus was found to be so much enlarged, as to fill the cavity of the pelvis. At the end of several weeks, after the patient had been considerably emaciated, and a disposition to hectic fever had taken place, a sudden and spontaneous discharge of pus issued



from the vagina, after which the symptoms ceased, and the patient recovered.\*

In the year 1819, a lady, aged about forty, who had been married to a second husband about six weeks, was attacked with symptoms of inflammation of the uterus. The disease was treated in the usual way, by bleeding, purging, warm

\* This case offers a remarkable instance of the disposition of a patient to judge of the practitioner by the event. The author, under whose care the patient remained during many weeks of anxious and unremitting attendance, had been engaged in lessening the inflammatory symptoms by bleeding, both general and local, by purging, by fomentations, and the use of the tepid bath: and he has reason to believe that the patient owed her safety to the vigorous measures which were employed. The patient was an actress; of course, therefore, no remuneration was accepted from her. But, neither the attention bestowed upon the case, nor its disinterestedness, (the latter of which is more frequently a reason for dissatisfaction, than an incentive to gratitude,) could command the confidence or secure the attachment of the patient. The author's services were discontinued: and those of another sought for, — shortly afterwards the sudden and spontaneous discharge of matter took place, when immediately the symptoms ceased. What was the inference? that the case was mis-managed at its commencement, and afterwards judiciously cured.

bath, &c. The powers of the constitution were gradually diminished by the great degree of symptomatic fever, and the patient became daily more and more debilitated, without any mitigation of the pain, except that which was produced by the exhibition of large doses of opium. Inability of making water, and of voiding the fæces, next presented itself. The former was repeatedly relieved by the use of the catheter. Saline purgatives, in some degree, obviated the latter inconvenience. An examination, *per vaginam*, being again made, the pelvis was found completely filled by an enlarged uterus, which was also perceptible above the pubis. There was no reason to believe that the enlargement of the uterus depended upon pregnancy. From this period of the complaint, the patient had the additional assistance of Dr. Scudamore. Sedative injections, repeated doses of opium, and the warm bath, constituted the chief part of the treatment. After some time, whilst in the act of expelling the fæces, a sudden discharge of pus took place through the rectum, of a most

offensive kind. On each succeeding day a quantity of similar pus was mixed with the fæces; and at length the discharge of matter ceased altogether. The uterus returned to its original size; menstruation took place; and when the author last saw the patient, the constitution had acquired a considerable degree of vigour.

It may be presumed, that something more than mere contraction of the cervix uteri must have taken place in the case last described; or it is probable that the pus would have made its way through the natural opening, instead of in the circuitous mode by adhesion and ulceration.

During the author's attendance upon some patients labouring under enlargement of the uterus, supposed to be carcinomatous, it has been occasionally remarked, that a sudden discharge has taken place of a small quantity of a fluid, of a yellowish-brown colour, after which the patient has remained comparatively easy for some time. As the appearance of this discharge could not be accounted for, it is not improbable

that the enlargement of the uterus might, in such cases, be owing to a distention of the cavity with pus ; the escape of a small quantity of which from time to time might, by diminishing the degree of distention, relieve the urgency of the symptoms.

The author offers this merely as a conjecture, which farther observation and experience may confirm or destroy ; but, if it be so, the occurrence, not being very unusual, these cases must exist more frequently than might at first be expected ; because other practitioners, whose attention has been directed to the cure of the diseases of the female organs, must often have heard similar remarks made by their patients.

The uneasiness attending this disease, the detection of an enlarged state of the uterus, together with the increased sensibility of the part, will naturally lead to the employment of those remedies which are found useful in removing inflammation : and this mode of treatment will be equally applicable in restraining the progress of

carcinoma, as in alleviating or removing the symptoms of this disease. If the habit of the patient be plethoric, twelve or fourteen ounces of blood may be taken by cupping glasses from the region of the sacrum ; or, under any state of constitution, ten or fourteen leeches may be applied to the groins, once in a week or ten days. The use of the warm-bath will be a source of great comfort to the patient, whose hips may be immersed in tepid water for fifteen or twenty minutes every night and morning ; at which time some warm water may be thrown into the vagina by a syringe. Opium may be exhibited in sufficient quantity to diminish the uneasiness of the patient ; to counteract the astringent effect of which, as well as to lessen inflammatory action, purgatives must be occasionally exhibited ; unless, indeed, sufficient relief can be procured by the administration of hyoscyamus or hemlock, which possess the advantage of not inducing constipation. When the uterus has acquired the size which it is found to possess at the fourth month of pregnancy, it is to be presumed



that the disease is not carcinoma, strictly so called; no tumour of this character, which the author has seen, having acquired this size; that is to say, ulceration does not take place in such tumours. A reference to a great number of preparations, illustrative of this disease, demonstrates the truth of this assertion.

The rapidity of the enlargement of the uterus in cases of collection of pus in the cavity of the uterus, comparatively with that of fleshy tubercle, may throw some light upon the nature of the case; and if there is reason to believe that the uterus is distended by pus, it may be advisable gently to introduce the extremity of a bougie, or of a male-catheter, into the os uteri, and to pass it onwards, until it has reached the cavity of the uterus. By such a mode of proceeding no harm can be done, and an opportunity may be given to the patient to be quickly freed of her disease.

## INFLAMMATION OF THE MUCOUS MEMBRANE OF THE VAGINA.

THE membrane of the vagina is liable to take on inflammatory action from many causes ; and, inflammation being once produced, the membrane is quickly excited to the secretion of a puriform fluid. When the very extensive surface of this membrane is considered, it will not be a matter of surprise that the quantity of fluid secreted by it should be very considerable. In the corrugated state of this membrane, the canal is of small diameter ; but, when distended to its greatest degree, a very large surface is exposed, the whole of which is endowed with a power of secretion. Inflammation of this part may be caused by the application of any of those circumstances, which excite inflammation elsewhere ; but the vagina is more especially subject to inflammation in consequence of the performance of those func-

tions, which succeed to communication between the sexes, the very act of which, in some women, produces the disease. The complaint may also originate from the pressure to which it is liable in the act of parturition. Inflammation also of this passage may arise from specific contagion, which form of the disease is denominated gonorrhœa. In the greater number of the cases of inflammation of the vagina, the disease extends to the neighbouring membrane of the urethra, as the symptoms appear to demonstrate. The disease, being once excited, is much disposed to continue in a chronic form; and after the inflammatory symptoms have all subsided, the discharge will continue profuse for a great length of time, even under the best management.

The symptoms attending both common and specific inflammation of this membrane, are not dissimilar. The disease begins by a sense of heat referred to the orifice of the passage, and extending “up the body\*,”

\* This is the term usually employed by the patient.

the uneasiness is sometimes described as a burning pain, affecting all the internal parts : an intolerable degree of itching of all the external organs is not an unusual concomitant ; and the labia themselves become enlarged, by a greater determination of blood being made to them. If the matter be not carefully washed from the folds of the part, the surface becomes superficially abraded ; and if it be examined attentively, a number of small round spots will be found to cover it. The sexual feelings become stronger during the continuance of the disease ; a sense of burning is experienced in the act of making water, arising partly from the disease affecting the urethra, and partly from the passage of the urine over the neighbouring irritable parts ; and the patient is excited very frequently to void the contents of the bladder, the urine being passed in small quantities only at a time.

The interval between the application of the cause and the first appearance of the symptoms in the case of specific contagion,

differs in length in different persons; depending upon the irritability of the parts concerned, the cleanliness of the person, or perhaps upon the degree of virulence of the disease in the person communicating the infection.

In the generality of cases, the first notice of the existence of disease is given at the end of about eight and forty hours; sometimes a little earlier; in other cases much later. If the suspicions of the patient are excited, the first symptoms will be observed sooner, than by women whose fears are not alive to the subject.

Attempts have been made to discriminate between the appearances of the matter secreted in common, and in specific, inflammation; and there are not wanting practitioners who fancy that the matter of gonorrhœa produces a stain upon the linen of a darker or more green colour than common pus. Such persons, in all probability, impose upon themselves; and too



frequently, it is to be feared, voluntarily mislead credulous patients.

The lymphatic glands in the groin sometimes enlarge, seldom in common, more frequently in specific inflammation, of the vagina; and in some instances, these glands are found to inflame, and to suppurate, although this is a rare occurrence. Where many glands inflame at once, supuration is less likely to take place, than when one gland only takes on enlargement. The enlargement of the glands subsides, as the inflammation is removed from the vagina.

In simple inflammation of the mucous membrane of the vagina, the purulent discharge being established in large quantity, the inflammatory symptoms frequently subside very rapidly, after which a termination is put to the secretion; the parts returning to a state of health, provided there be no acting cause producing its continuance; in which case the symptoms will

continue until its removal, when they will speedily cease.

In the case arising from specific contagion, the duration of the disease is greater; and the discharge, once established, continues for weeks, or perhaps for months, although not always accompanied by the other local symptoms.

It is difficult, if not impossible, to determine at what period of the disease the power of communicating infection ceases. A prudent practitioner will be careful to give no decisive opinion respecting the non-existence of this power, as there are no criteria by which its presence can be ascertained; and it may perhaps be presumed, that no person is secure from danger who indulges in intercourse with a woman so long as the discharge continues.

It is a curious fact, that in young subjects, both male and female, purulent discharge from the urethra and from the vagina takes place in consequence of the

existence of irritation in distant parts; thus, during dentition, whilst the capsule of the tooth, or the gum covering it, is violently pressed upon by the crown of the tooth, the above circumstance is not unusual; medical men, therefore, should be careful to avoid denominating this symptom venereal; since, were it actually so, it would lead to nothing useful in the treatment; and discussions, highly destructive of the peace of families, might be thereby introduced.

Histories of cases of gonorrhœa virulenta and gonorrhœa benigna, by which names inflammation of the mucous membrane of the vagina has been treated of, are to be found in the works of many excellent writers on surgery, who have also laid down the best directions for the management of the different forms of the disease. It remains only for the author to state, that it appears to him that the mode of treating venereal gonorrhœa differs little, if at all, from that which is applicable to the management of the case depending upon

the application of common causes. It is rarely necessary to carry the employment of antiphlogistic remedies to any great extent. Temperance, rest, care in avoiding general and local stimulants, mild purgatives, tepid bathing, constitute, perhaps, almost all the necessary remedies. Mucilaginous drinks are generally recommended; and, inasmuch as the salts of the urine being abundantly diluted, will be less likely to stimulate than when in a state of concentration, such diluting drinks may be advantageously employed. Nitrate of potash is frequently exhibited: the author has prescribed it, but perhaps more in compliance with custom, than for any better reason.

Great stress has been laid by a writer of deserved celebrity upon the effects of Peruvian bark, in diminishing the irritability of the urethra in this disease.\* Upon the authority of this writer, the author has exhibited it; but he has not been happy

\* Dr. George Fordyce.

enough to observe any beneficial effects from it.

When the inflammatory symptoms have subsided, and when the purulent discharge appears to continue, either from a relaxation of the secreting vessels, or from what has been termed a habit of secreting, the exhibition of Peruvian bark, of the resins, turpentine, and above all, of the true balsam of copaiva, has been attended with the best effects. Astringent injections thrown into the vagina will also be found serviceable; and they may be employed at a much earlier period of the disease, than in the other sex, in whom it has been thought that a foundation has been laid by them for the production of strictures in the urethra.

It is true that such strictures have been frequently attributed to the too great strength of the injection employed; but when it is considered that the urethra of different persons varies in its degree of irritability, that man must acknowledge



himself to be a very nice prescriber, who can accommodate precisely the strength of his injection to the peculiar susceptibility of the urethra in every individual case.

Practitioners of deserved celebrity have differed much upon the subject of gonorrhœa virulenta being followed by secondary symptoms. Few surgeons think it necessary to subject a patient to a long continued mercurial course; many direct the employment of small quantities of mercury only, whilst the majority neglect it altogether.

The question is of great importance; and the author declines to offer an opinion upon the subject. He has certainly seen copper-coloured spots on the bodies of patients, who have laboured under gonorrhœa virulenta, removable only by the oxymuriate of mercury and sarsaparilla: but he thinks that he has seen similar appearances upon the skin of patients, whose chastity could not be suspected.

The author has known several instances of married women, who have laboured under a purulent discharge, (which might possibly be the effect of contagion,) bringing forth children prematurely ; some of which have been born dead, and others possessing a dark-coloured furfuraceous cuticle in different parts of their bodies, which appearances have yielded to the use of the milder preparations of mercury.

## ABSCESS OF THE VAGINA.

THE labia and the nymphæ, but especially the former, are liable to take on inflammation, which frequently terminates in the formation of matter. The symptoms of this disease and its treatment differ so little from those of inflammation in other external parts of loose structure, that nothing need be said respecting them in this place; but purulent discharges from the vagina occasionally issue from the cavities of abscesses, which form in the cellular membrane surrounding this canal. Such cases not admitting of those modes of cure which are applicable to other purulent discharges from these parts, some observations will be here made upon the subject.

In the first place, it is to be remarked, that such cases are of very infrequent occurrence; the common causes of inflammation being much more apt to produce

this action in the uterus, or in the membrane of the vagina, than in the cellular membrane which surrounds the passage.

At the commencement of the disease, there are no especial circumstances which point out its existence; the practitioner finds symptoms present which denote local inflammatory action, and treats them accordingly. At length a discharge of matter takes place, which shortly ceases, and the patient believes that her complaint is cured. After some time she is again attacked with uneasiness in the part affected, attended with a sense of fulness and of pressure; and again a quantity of pus escapes. These circumstances lead to an examination, when a soft tumour will be found behind the vagina; and pressure being made upon it, pus will escape. After the disease has continued some time, the general health will be found to suffer, and, occasionally, the parts in the neighbourhood will become more than commonly irritable.

In the few cases of this disease which have fallen under the care of the author,

the menstruation has been usually profuse; which, indeed, might be expected, when it is considered that inflammatory action is taking place in the neighbourhood of the uterus.\*

The author has known this disease arise in single women of lax fibre, in whom no cause for its production could be assigned. Indeed, whenever the disease has occurred, the subjects of it have been weak and irritable women. At different periods of time, the glands of the groin become enlarged and hard, and sometimes suppurate.

When a collection of matter has taken place in any part of the body, the absorbents are disposed, by their action, to form a communication either with the surface of the body, or with an internal cavity having an external opening, provided such cavity

\* Small abscesses sometimes form in the cellular membrane surrounding the meatus urinarius, into the cavity of which they open, and through which they discharge their contents: these are rare occurrences. The author has seen a very few such; they are to be treated as other cases of fistula, by laying open the cavity of the abscess; and they yield to no other mode of management.



lies adjacent: and, *cæteris paribus*, the abscess will break where the action of the parts is the most considerable, and the temperature the highest. For instance, if an abscess takes place in one of the labia, a natural opening will be more likely to occur in that part which is in contact with the labium of the opposite side, than externally. When abscess takes place in the cellular membrane surrounding the rectum, it will frequently burst into that gut, instead of on the outside of the anus. So, in like manner, when abscess takes place in the cellular membrane surrounding the vagina, it will be found to break more frequently at the upper part, where the action of the vessels of the parts is the greatest, than at the lower part, notwithstanding the pressure made upon it by the matter contained; and out of this circumstance arises one of the greatest inconveniences attending the disease; the abscess in this way being seldom emptied of its contents, which become, from retention, highly offensive; the supernatant quantity escaping out of the mouth of the abscess, when its cavity can contain no more.

Cases of the above description become very unmanageable, even when clearly understood. It is evident that no astringents can restrain the discharge, that no stimulant can be thrown into the cavity of the abscess, so as to induce a contraction of it, adhesion between its sides, or granulations; and unless the most depending part of the abscess should be situated so low as to be capable of being brought within sight of the surgeon, it would be hazardous to attempt an operation, so as to expose its cavity, or to introduce any extraneous body, such as a seton, to excite a new action within it.

In the year 1818, a young lady, recently married, laboured under an offensive purulent discharge, not constant, but occasional, and which always followed communication with her husband; so that the case was involved in some obscurity. A tenderness of the surrounding parts was present, and the general health was a good deal impaired. It was ascertained, that, although some uneasiness attended connection, the

patient was rendered more comfortable for several days afterwards.

The lady (who lived in the country) came to London, and placed herself under the care of the author. Mr. Cline also saw the patient two or three times in consultation. On examination, a bag distended with fluid could be felt behind the vagina, the lower part of which being pressed upon, a highly offensive purulent discharge of a greenish colour escaped from the upper part of the vagina. The pressure being continued, all the matter escaped, and the bag could be no longer felt. Thus it was satisfactorily explained why the symptoms were diminished by the coition, and how this produced an evacuation of the contents of the bag.

It was not judged proper to resort to any surgical operation: a plan of treatment was directed, having for its intention the improvement of the health of the patient, and the prevention of accumulation in the cavity of the abscess.

The patient returned into the country ; the powers of her constitution were restored ; the discharge diminished, and ceased to be offensive ; pregnancy took place, and the patient was delivered prematurely, in consequence of some exertion which she had undergone.

Another case, not very unlike the preceding, occurred in a lady in the country, who fell under the care of Mr. Dalrymple, of Norwich, and the author. It is hardly worth while to describe the particular circumstances of this case. It is to be observed, however, that it terminated equally favourably with the former, in consequence of the employment of similar means.

A young lady was attacked with pain about the pelvis, attended with soreness of the vagina, and she was incapable of bearing the slightest exercise in a carriage without an aggravation of all the symptoms. A brownish puriform discharge, of an offensive smell, was occasionally voided ; the functions of the stomach were disturbed ; the powers of the constitution flagged, as well

as those of the mind. An examination was made by the author; but he discovered little, except that, on the removal of the finger, a purulent discharge followed. The uterus was perfectly healthy. This case was also attended by Mr. Murray Forbes. The patient employed a variety of different remedies, both local and general; and although she gained strength, and her spirits improved, the author cannot flatter himself that the means which he suggested were of the least service in removing the disease itself.

It is to be observed, that in all the cases of this disease, the discharge is not constant, as from an ulcerated surface; but that the patient is sometimes entirely free from it, whilst at others the quantity of puriform fluid is very considerable.

Whenever the cavity of the abscess can be safely laid open throughout its whole extent, such a mode of treatment is advisable, great care being taken that the abscess is filled up by granulations, by keeping the sides of the wound separated by the introduction of lint.



ON ULCERATION ATTACKING THE OS  
UTERI AND THE CERVIX UTERI.

It has been too much the custom with practitioners to consider all the different kinds of ulceration, taking place in these parts, as terminations of the disease called scirrhus or carcinoma. This opinion has been strengthened by the fatal termination of such ulcerations. But there are two varieties of ulceration attacking these parts, which, although both fatal in their consequences, produce symptoms differing very much from each other. In the second edition of Dr. Baillie's work on Morbid Anatomy, a disease called Malignant Ulcer of the Uterus is described, and Dr. Baillie has the candour to state that, in his first edition, he confounded this disease with scirrhus enlargement, considering these as varieties of the same complaint.

It has been the custom of the author, during a period of sixteen years as a teacher, to describe two different kinds of ulceration of the uterus, both of which may be considered as malign ; the one under the denomination of the corroding ulcer of the os uteri, the other under the name of carcinomatous ulcer. These will be separately considered.

ON THE CORRODING ULCER OF THE OS  
UTERI.

THIS complaint usually occurs at that period of life at which the secretion of the menstruous fluid becomes naturally interrupted. The age at which this happens, it is well known, varies in different women. The author does not recollect having met with an instance of the disease before the age of forty, and it commonly takes place between that age and fifty-five.

It would be expected, *à priori*, that diseases of increased action would be especially likely to arise at this time, in consequence of the cessation of a long-continued secretion.

Even when no change of structure takes place in the uterus, that viscus is commonly found of a larger size than it is usually met

with in the unimpregnated state in an earlier period of life, and it is not until the balance of the constitution has been restored, that the organ is again brought back to its original size. It is not here meant, that any considerable degree of enlargement takes place, but just what might be expected to occur in a part to which the usual determination of blood is made, but from which the accustomed secretion has been removed.

When inflammation attacks a part, if its progress be not arrested, it sometimes happens, especially in situations where loose texture prevails, that abscess takes place. In situations possessing a firmer texture, it more usually happens that an extravasation of coagulating lymph is formed, occasioning a thickening of the part. The inflammation proceeding, ulceration takes place in the part so thickened. Sometimes, however, this is not the case, and the symptoms of inflammation retire when the arteries have effected this change of structure.

In other cases, especially where inflammation attacks membranes, the morbid action proceeds to another stage, in which the action of the absorbents produces what is termed ulceration, no intermediate thickening of the parts concerned having been effected ; and this is the peculiarity of that disease which is called the corroding ulcer of the os uteri.

It has been so much the custom with writers to have recourse to other languages to designate different diseases, that it may be thought that a better name might be given to this complaint than that of “ the corroding ulcer of the os uteri.” But as it is the object of the author to be understood, and not unnecessarily to swell an already too extended nosological catalogue, he prefers the above name. If another reason for employing this term should be expected, it is briefly this,—that it was employed by the late Dr. Clarke, whose acuteness and talents were only equalled by the simplicity of his manners at the bed-side, and of his language in the lecture-room ; and who



strove, not to be admired, but to be useful.

When once ulceration has produced a breach of surface in a membrane, it frequently happens that such ulceration extends itself over continuous parts of such membrane, so as to enlarge its dimensions ; in other instances the process involves the more deep-seated parts, causing an excavation, with no enlargement of the original boundary of the ulcer.

In the corroding ulcer of the os uteri, the membrane which covers this part first takes on disease, and very shortly afterwards the ulcer extends to the whole circumference of the opening, and to the parts immediately beneath it ; so that the natural shape of the os uteri is destroyed. Thence the ulceration proceeds to the cervix, and consumes it ; so that, if the patient should die in this stage of the disease, nothing will be found, after death, but the body and the fundus of the uterus. Sometimes the disease does not stop here ; but, before the

patient is destroyed, the absorbents employed in the process of ulceration will have taken up nearly the whole body of the uterus, so that very little more than the fundus will remain.

In the author's collection, there are three preparations showing the disease in all of these different stages.

This progress of destruction does not happen in the *carcinomatous* ulcer, by which disease the patient is worn out before there is time for such a degree of absorption to have happened. If an examination be made *per vaginam*, the breach of surface may be readily distinguished, and the extent of the disease ascertained; but no hardness of the parts will be present, no thickening, no deposit of new matter.

If the body of the patient be inspected after death, there will appear abundant evidences of the destructive process, but no hardness, no thickening, no deposit of new matter; so that, during life, and after

death, there is a tangible and visible difference between the corroding ulcer, and the ulceration of cancer.—A manifest distinction between these two diseases will be met with also in the

*Symptoms.*

Changes in the temperature of different parts of the body so frequently occur, that but little attention is usually paid to them. A sense of extraordinary heat in a part may be noticed ; it may subside, and be forgotten : so, in this disease, a sense of warmth referred to the upper part of the vagina, may arrest the attention of the patient, but may not excite apprehensions respecting its cause, until either it has been greatly increased in degree, or accompanied by other symptoms.

It is not unusual with women to refer all extraordinary sensations, arising at the time of the cessation of the menses, to what they term “the change of life;” and to consider that, when they have thus accounted

for their diseases, they have at the same time cured them.

The menstruous secretion, it has been already said, has ceased ; in its stead, a yellowish discharge escapes, perhaps trifling in quantity, and now and then mixed with a streak of blood ; by degrees the sense of warmth is converted into a glowing heat, affecting the region of the uterus ; and it is by no means uncommon with patients to state, that they feel “ as if a hot coal was within them.”

As this sensation of heat increases, so the quantity of the discharge increases, the ulceration extending more rapidly.

The perpetual drain necessarily diminishes the quantity of circulating blood : in consequence of which the countenance becomes pallid, and weakness of the whole system is produced. The effects of weakness upon the muscles, the arteries, the heart, and the absorbent system, are too well known to need any description here.

It will be sufficient to state that the effects of debility will be visible in the want of the due performance of the functions of these and other parts.

Supposing that this disease were *carcinomatous* ulceration, amongst an assemblage of other symptoms the most prominent would be that lancinating pain, which invariably attends that complaint.

In the corroding ulcer, lancinating pain forms no part of the symptoms. By this assertion, it is not intended to convey a notion that a disease so formidable as that which has been described can exist wholly without uneasiness; an ulceration of the leg will be attended with pain, but by no means comparable with that attendant upon cancerous ulceration of the scrotum, the penis, or mammæ.

It appears, then, that pain of an intense and acute kind is not a character of the corroding ulcer of the os uteri.



When a finger, introduced into the vagina, is made to pass over the ulceration, the patient does not complain of pain; she does not suddenly shrink from pressure, as when carcinomatous ulceration is present: but if asked what sensations he experiences, she will commonly reply that she has a sense of soreness.

From what has been said, the author trusts that a disease has been described of a distinct kind, being nevertheless allied to what has been called cancer in its termination, possessing uniformly a fatal tendency, although the corroding ulcer will last during a much greater length of time, unless attended by violent hemorrhages, which arise sometimes from the exposure of blood-vessels, the coats of which are destroyed by the ulcerative process.\*

\* Under prudent management the subjects of the corroding ulcer of the os uteri may live many years, experiencing few symptoms excepting those of debility, and even these admitting of much alleviation.

*Treatment.*

In no disease is it more important to attend to the early symptoms, than in inflammation. By so doing the most frightful consequences are frequently prevented, and the safety of many organs thereby insured; as when this process attacks the brain, the eye, the lungs, &c. It is true that the uterus performs no office in the constitution when menstruation has ceased; it remains an inactive and thenceforward a useless part, liable, however, to suffer materially from morbid changes, and to involve the constitution at the same time in destruction. When once the ulcerative process has commenced in this disease, the part attacked by it, never, as far as the author's experience has gone, recovers its healthy structure; but increased action of the blood-vessels of the os uteri, which would eventually terminate in ulceration, may probably be diminished or controlled, so that no ulceration may take place, and,

by such a mode of treatment, much advantage is gained.\*

Whenever, therefore, a patient in whom the menstruous secretion has recently ceased, complains of an increase of heat in the lower part of the back, or of the abdomen, or in the parts of generation themselves, a prudent practitioner, foreseeing the probable result, will direct the loss of some blood from the neighbouring parts. The most precise mode of obtaining this blood will be by cupping ; although, if the patient be averse to the operation, leeches may be applied ; but, upon the whole, they do not afford the same certain and immediate relief, neither can the quantity of blood removed by them be so exactly estimated.

\* The author, since the publication of the first edition of this work, doubts whether he has not made this assertion too carelessly and hastily. If it be asked, whether he is in possession of any more successful mode of treatment, he unhesitatingly replies in the negative ; but, if his want of confidence in remedies remains unaltered, he is disposed to place greater reliance upon the powers of nature, and less upon his own discrimination.

The operation of cupping should be repeated at the termination of a fortnight or three weeks ; and, if the sense of heat should continue, the further loss of blood should be directed. The only disadvantage which can arise from this practice will be a temporary weakness, — a circumstance of no importance when compared with the magnitude of the complaint which it is the object of the treatment to remove.

General bleedings from the system will afford little or no relief ; and will, as is well known, induce a greater degree of debility.

The immersion of the hips of the patient in warm water twice a day will be found highly serviceable ; and the hip-bath will be the most convenient mode of employing this remedy. The heat of the water should be so regulated that it should not exceed 94° ; neither should the temperature be such as to induce any feeling of chilliness. Some of the water in which the patient sits may be thrown into the vagina by a female syringe.

If this remedy be useful in the early stage of the complaint, it is no less so in that in which ulceration has taken place, as by means of it the parts will be kept clean, and the pus removed soon after it has been secreted. When the patient has not the means of procuring the convenience of the hip-bath, she may apply warm water by sponges to the lower part of the abdomen, and to the external organs of generation; and the use of the syringe with warm water will be still more essential than where more perfect modes of ablution can be attended to.

Saline purgatives, exhibited in very small doses, possess not only the power of allaying inflammation, by the watery secretions which they produce from the intestines, but they appear also to possess a specific power of tranquillizing the system, when in a state of disturbance and increased action, even when they produce very little sensible effect.

Twenty, thirty, or forty grains of mag-



nesiæ sulphas, or potassæ sulphas, may be exhibited twice in each twenty-four hours; and the beneficial effect of these medicines may be still further increased by combining them with very moderate quantities of extractum conii, or extractum hyoscyami.

The neutral salts may be made more agreeable by the addition of a small quantity of some aromatic water; and, if nausea should be produced, four or five drops of tinctura opii may be added to each dose, instead of the other vegetable sedatives.

There can be no objection to the employment of sarsaparilla, or of any medicine supposed to produce an alterative effect, provided that such medicines are not found to derange the functions of the stomach, or in any way to impair the powers of the constitution.

There is too much reason to fear that both of these effects are unintentionally produced, when patients are desired to

swallow a quart or three pints of decoctum sarsæ in the course of each twenty-four hours.

An abstemious diet should be enjoined ; and the food should be of such a nature as will neither form blood readily, nor stimulate the patient, nor oppress the stomach. Fish, puddings, boiled fruits, and vegetables, will constitute the best kind of nourishment.

It need hardly be stated, that every thing which can excite the action of the parts concerned should be studiously avoided.

Hitherto it has been supposed, that the disease has been in its infancy ; but, let it be allowed that ulceration is proceeding, and that the patient is already weakened by the quantity of the purulent discharge, what supports that ulceration but the inflammatory process ? what remedies will be more serviceable than those which retard it ? so that, even in this second stage of the disease, the remedies applied to the first

stage will be equally proper. At length, however, it may happen, that the patient may be so much weakened by the purulent secretion, as to render it probable that she may sink under its effects.

Mild astringent fluids, in the form of injection, may then be thrown into the vagina, the posture of the patient during the use of them being such as to favour their application to the seat of the disease.

In the progress of the ulceration, hemorrhage may arise; to restrain which, some stronger applications will be necessary, such as solutions of sulphas aluminæ in decoctum corticis granati; or, if this should be inefficacious, solutions of cupri sulphas, or argenti nitras.

Small doses of acidum sulphuricum, given in equal parts of decoctum cinchonæ and infusum rosæ, will sometimes be found useful auxiliaries; and both in the early and in the latter stage of the disease, the patient should remain constantly in the

horizontal posture, if she sets any value upon the continuance of life; and the necessity of attending to this latter direction should be enforced in the strongest manner by the practitioner.

ULCERATED CARCINOMA OF THE  
RECTUM.

THE vicinity of the rectum to the uterus, the sympathy between these parts, and the effect produced by the action of the one upon the other, will account for an assemblage of symptoms in diseases of both of these organs, of a mixed nature; so that, without an accurate enquiry and an examination, it will be difficult to determine which part has become affected. Many instances have occurred, in which a complaint of the rectum has been treated as a disease of the uterus; and even a greater number, where alterations in the structure of the uterus have been referred to the rectum.

In proportion as the practitioner is engaged in treating the complaints of one or the other of these parts, he will be led to attribute the symptoms to that organ to which his attention has been chiefly directed.



Whenever, therefore, symptoms of carcinoma in the rectum or in the uterus present themselves, it should be first recollected that, as the latter part is more liable to the complaint than the former, it is probable that the uterus is the seat of the disease.

In the first volume of this work, the first stage of carcinoma, both of the uterus and of the rectum, has been considered ; and it now becomes necessary to record those changes which take place in consequence of the ulcerating process commencing, which converts the complaint into what has been familiarly called cancer.

The mucous discharge which attends the early stage of carcinoma of the rectum becomes gradually of a purulent nature, and the quantity of pus secreted will be found to be in proportion to the length of the intestine included in the disease.

The appearance of pus at the anus may lead to a suspicion that fistula exists ; but

an examination of the parts will shortly put this question at rest.

If the finger of the practitioner be carried into the rectum, it will be girt by a constriction of considerable thickness, through which it cannot be passed; and if any attempt is made to surmount the difficulty by violence, the patient will suffer excruciating pain, and a discharge of blood will be the consequence of such a rude enquiry.

The surface of the constricted part, instead of possessing the smoothness of the villous coat of the intestine, will be sensibly abraded; and it will be scarcely possible to conduct the investigation without producing some discharge of blood.

The existence of the disease being once known, the surgeon should not be too solicitous to ascertain its extent, as no advantage can arise from such knowledge even when acquired; because it is not here, as in the more superficial situations of the dis-

ease, that it can be removed by operation ; previously to determining upon which, in the latter cases, it would of course become necessary to be acquainted with the boundaries of the disease. The most trifling case of carcinoma existing in an internal part requires the same vigilant care, as that in which the disease has proceeded to a much greater extent ; and the same fatal consequences will be found to ensue from a small carcinomatous thickening of the intestinal canal, as from a larger portion being involved in the disease, the patient being frequently cut off not so much by the symptoms arising from the disease itself, as from the effects produced by such disease upon the functions of the organ which is the seat of it.

A large tubercle of the liver may exist during many years without proving fatal ; but a small tumour of that organ, situated so as to compress the gall ducts, may destroy the patient in a much shorter time, by producing jaundice, dyspepsia, emaciation, and dropsy.

Very little is known respecting the diseases of the pancreas ; but a trifling thickening of the head of that viscus pressing upon the gall ducts may produce irremediable jaundice, dropsy, and death.

An enlargement of the mesenteric glands may exist to a considerable extent, attended only by symptoms of debility ; but such a consolidation of them may be produced as may compress the large blood-vessels at the posterior part of the cavity of the abdomen, so as to cause convulsions and death : a preparation of which the author has in his collection.

In like manner, carcinoma affecting not more than a quarter of an inch of the rectum may, by obstructing the passage of the fæces, cause a distention of the whole colon ; and the patient may die of inflammation of the coats of the gut produced by such distention. If three inches of the intestine had been involved in the disease, the symptoms would only have been the same ; so that neither will the treatment be

improved, nor the prognostic be assisted, by the knowledge of the extent of the complaint.

When common ulceration attacks a part, such part is destroyed by it; but where the ulceration of carcinoma exists, the deposit of new matter by the arteries more than counterbalances the effect produced by the action of the absorbents, and the thickening and the destructive process proceed simultaneously.

The functions of the rectum, as a reservoir for the *fæces*, and as a canal through and by which they are to be ejected, render it impossible to maintain this part in a state of rest; and the constant pain belonging to the disease will be materially aggravated by the disturbance to which the parts will be occasionally subject.

If the constipation attendant upon carcinoma of the rectum be not referred to its true cause, and if the patient be frequently exposed to the action of purga-



tives, the symptoms of the disease will be increased by the very means employed to alleviate them.

All the symptoms which attend the first stage of this disease will be found to exist in a great degree in the second. The darting pain will be increased both in frequency and in violence; the action of the heart will be greatly and permanently accelerated; the functions of the stomach will become more and more impaired; vomiting will be almost constantly present; temporary relief will be found only in opium; and permanent rest only in the grave. In the progress of the ulceration, blood-vessels will be exposed, which will pour out, according to their size, a larger or a smaller quantity of blood; and happy would it be for the patient if such hemorrhage should prove fatal; but such an event is hardly to be expected; and, unless in parts more abundantly supplied with blood than the rectum, such an occurrence is seldom met with.

The ravages of carcinoma extend in all

directions ; but chiefly where the disease is least resisted. Thus it will occasionally happen that the parts which form the barrier between the rectum and the vagina will be destroyed, and a communication will be formed between the two cavities ; or it may happen that distention of the upper part of the rectum by fæces above the seat of the disease may cause common ulceration of the coats of the intestine and of the vagina ; and the fæces may from this cause also be voided through the latter passage during the continuance of the patient's life. From this point of time, the disease in the rectum proceeds after the manner of external carcinoma ; the part in which it exists, having ceased to perform its accustomed functions, becomes no longer annoyed by serving the purpose of a canal.\*

\* In some cases, so great a degree of thickening takes place in the seat of the disease as to obliterate the canal entirely — the fæces, having now no longer a power of escaping, will distend all the great, and sometimes even the larger, intestines, until at length their coats yield, when death quickly follows the escape of their contents into the cavity of the abdomen.

Great stress has been laid upon the foetor of the discharges from cancerous sores; that they are offensive is beyond doubt, but it is probably in consequence of the sloughing process which commonly in some degree exists in such sores, and not from any peculiarity of the discharges themselves. Common pus to which the access of air is allowed will become putrid; and it will be difficult to wash away the discharges from the parts, as soon as they are secreted.

In those instances where a communication is formed between the rectum and the vagina, the mixture of the contents of the intestinal canal with the discharges from the vagina will give them a fæculent odour.

As ulcerated carcinoma of the rectum, and of the uterus, require a mode of treatment nearly similar, the reader is referred to the observations which will be made upon the subject of ulcerated carcinoma of the uterus, with regard to that point.

ULCERATED CARCINOMA OF THE  
UTERUS.

A CARCINOMATOUS tumour of the cervix of the uterus, or a thickening of that part, may arise between the age of thirty and forty, and the woman may die of some other disease during its continuance; or she may live many years under proper management, and provided she will submit to certain privations. The treatment of the first stage of this disease will be found in the first volume of this work. Sometimes, however, notwithstanding all the means employed on the part of the practitioner, and all the disposition to submit to the rules laid down, upon the part of the patient, a new action will take place upon the surface of the tumour, or thickening; namely, absorption, or the ulcerative process.

In one patient, ulceration will be found to attack a small part only of the tu-

mour; in another, the process will commence all at once over a more extended surface.

In the former instance, the disease will be a longer time before it proves fatal; in the latter, *cæteris paribus*, the progress of the disease will be more rapid. A great difference is also observable in the quickness with which the disease proceeds at the commencement of the ulcerative process, and after it has continued some time; and this is attributable to the failing powers of the patient, in which case, the action of the absorbents being lessened, the ulcerative change proceeds more slowly. Practitioners should be well aware of this fact, or they will be led hastily to make a false prognostic respecting the duration of the complaint, estimating the future steps of the disease by the former.

Thus a number of instances will be found, in which the patient will exist in a state of extreme weakness during many weeks, or even months, contrary to the expectations



of the medical attendant. Spontaneous bleedings from the ulcerated surface, producing more sudden debility, will have the same effect in retarding the progress of the disorder.

At the commencement of the ulcerative process, it is not unusual for the patient to complain of a puffy and enlarged state of the external organs, which owes its origin simply to the increased action and distention of the vessels in the neighbourhood. A great degree of itching is another frequent attendant, and erysipelas occasionally takes place in the vicinity.

The cuticle is often found to desquamate; a trifling oozing ensues, which dries upon the surface, forms furfuraceous scales, and constitutes a new source of irritation. These latter inconveniences are by no means confined to the external organs of generation, as they are usually called; but they extend themselves towards the groins, and to the inside of the thighs; the vestibulum becomes irritated by the discharge, which assumes

an ichorous, and shortly afterwards a purulent appearance. But the quantity of the discharge is by no means comparable with that which is met with in some other diseases of those organs.

The pus discharged in these cases has usually a foetid odour, the reason of which has been before given. The quantity of the discharge sometimes greatly diminishes, although the disease advances, in consequence of the diminished quantity of blood in the circulation; streaks of blood are occasionally mixed with the pus which escapes; or small coagula come away; or hemorrhage may take place in quantity sufficient to cause syncope, and to excite great alarm in the mind of the patient.

If the bladder and the rectum have not sympathized with the disease in its early stage, they will seldom escape at this period, not only from the consent which obtains between all these organs, but also from the disease extending itself to these in common with all the adjacent parts. Such

a degree of thickening of the meatus urinaris sometimes takes place as to impede the passage of the urine, and to require the use of the catheter ; shortly after which the urine will gradually and spontaneously escape, not through the urinary passage, but from a communication formed between the posterior part of the neck of the bladder and the vagina. Portions of coagulating lymph will frequently be washed away from the parts in the passage of the urine.

When the vicinity of the rectum to the uterus is considered, it will be expected that a communication between the former part and the vagina would at the same time take place ; but this is not so ; as in many cases, where there is a fistula of the bladder, there will be found no communication between the intestine and the vagina.

Still, however, this circumstance is now and then met with, and from the moment that it is established, no fæces pass through the anus ; the external parts forming the

channel through which urine from the bladder, fæces from the rectum, and pus from the part affected by ulceration, are discharged. The stench now becomes intolerable, and the hips of the patient lying almost always immersed in the excreted matters, the soft parts inflame, and sloughing takes place.

Whilst these changes are going on in the organs which are the seat of the disease, others no less visible and distressing are met with elsewhere; the circulation becomes hurried, and the additional wear and tear, produced by this circumstance, increases the emaciation always attendant upon this complaint. The fat is absorbed in every part of the body, so as to expose the shape of the skeleton; the muscles shrink, and by degrees the blood-vessels become drained of their contents, the pulse acquiring a character of hardness, from the necessarily increased action of the coats of the arteries upon the diminished quantity of their contents. The constitution possesses no power of compensating

for this waste of strength and of substance ; the functions of the stomach fail ; little food is received, less is digested ; and sometimes incessant vomiting takes place, first of the matters usually contained in the stomach, and afterwards of bile, which regurgitates into the stomach from the violent efforts of retching. Small ill-conditioned sores arise in the angles of the mouth, and tease the patient not a little ; the tongue becomes sore, its surface being sometimes pale, dry, and glossy, and sometimes having a dark red colour.

The mucous membrane which lines the mouth is liable to small ulcerations, having a languid base ; and these are called aphthæ. Perhaps none of the mucous membranes in the body are exempt from these appearances, in certain states of weakness produced by long-continued disease. They are occasionally seen about the margin of the anus, and the author has frequently noticed them upon the surface of the vestibulum.



A burning heat of the stomach, and of the intestinal canal, becomes another cause of distress to the patient ; this sensation may be dependant in part upon the irritating quality of the fluids of the stomach, and in part upon the presence of aphthæ in the *primæ viæ*. Another symptom, by which the patient is much distressed, is an insatiable thirst, which nothing can allay. This greediness of liquids is not present during the whole of the disease, but it arises at that part of the complaint at which so little blood remains in the blood-vessels as not to furnish fluids for secretions. Something like this takes place in hemorrhages, when they become profuse. To sum up the patient's misery, to render her situation more distressing, she is tortured by a violent, acute, and darting pain, sometimes resembling a sharp instrument piercing the pelvis in different parts ; becoming sometimes so intense as to cause the most patient woman to exclaim ; and depriving her of all quiet by day, and all repose by night.

Thus it appears that the situation of a woman labouring under ulcerated carcinoma of the uterus is infinitely more pitiable than that of a woman who has the same disease in her breast; for not only are the symptoms more numerous, and more insufferable, but she has not the good fortune to be cut off in the progress of the disease by accidental symptoms. In ulcerated carcinoma of the breast, the patient is usually destroyed by hydrothorax: but no such blessing is afforded to the subject of this disease in the uterus; the sufferer being compelled to endure till her frame is exhausted by pain, by vomiting, by want of sleep, by discharge, by an offensive atmosphere, or by gangrene of the integuments.

#### *Treatment.*

In considering the mode of treating ulcerated carcinoma of the uterus, regard must be had to the cause of this disease, which, although not obeying the laws by which common inflammation is governed, is nevertheless controlled by the employ-

ment of those means which subdue that process when arising from the application of common causes. Whenever a patient, labouring under carcinoma of the uterus, has placed herself under the constant care of a physician or surgeon, it will be necessary that he should watch with attention the changes which take place in her constitution. If he should find the circulation becoming accelerated, the skin more than usually hot, flabbiness of the integuments, softness and shrinking of the muscles in different parts of the body, he may presume that some important change has taken place in the diseased organ. If, together with these symptoms, the lancinating pain has been rendered more acute; if the sympathies between the uterus and the adjacent parts, or between that organ and the stomach, have been more than usually called forth; or if, lastly, the mucous discharge has assumed a puriform character, there can be little doubt that a breach of surface has taken place, and that the complaint has acquired its most frightful and distressing character. Sometimes consi-

derable itching ushers in this change : from this point of time, all those cautions which were offered to the patient in the earlier stages of the disease should be insisted upon, as circumstances essential to her future comfort, and necessary to her preservation. If the patient should possess a vigorous constitution, and if she has been in the habit of living freely, the pulse being full, and strong, and hard, it will scarcely be justifiable to omit general blood-letting. Such a practice is, however, to be carefully followed ; and the propriety of adopting it must be left to the judgment of the practitioner, who must take into consideration this circumstance, that the disease does not exist in an organ essential to life, and that time will be allowed him to repeat local blood-lettings, if he should consider the latter to be more advisable. So that the treatment should not only be adapted to the symptoms themselves, but should have relation to the organ involved in the disease.

Some blood having been taken away by the lancet, the practitioner will determine

upon the propriety of a second blood-letting, by the greater or less degree of the inflammatory crust, and by the proportion of the solid to the serous part of this fluid. By a single general blood-letting, the symptoms may be arrested, and the ulcerative process may remain nearly stationary, as far as it may be judged of by the subsidence or diminution of the symptoms.

When the disease occurs in less plethoric constitutions, where general blood-letting would be contra-indicated, local bleeding will be found eminently serviceable; and, by a timely use, and repetition of this remedy, there is reason to believe that essential benefit is obtained. It has been already observed that, during the process of ulceration in this disease, the deposit of new matter continues, so that it is by no means uncommon to find, on opening the bodies of women who die in the ulcerated forms of this complaint, a much greater thickening of the parts than actually existed many months previously to death. Local blood-letting, then, diminishes the action



of the arteries, by which new lymph is effused. The quantity of blood to be taken by cupping may vary from six to twelve ounces, and the cupping-glasses should be applied just above the fissure between the nates. It is not always practicable to procure a sufficient quantity of blood from the lower part of the abdomen; and even if it were so, women are very naturally and properly averse to the operation being performed at that part. If, therefore, it should be thought right to take away blood from the lower part of the abdomen, the object must be affected by the application of leeches scattered above the pubis, from one groin to the other. From a variety of circumstances, it becomes impossible to estimate the precise quantity of blood taken away by these means; but it may be presumed that three or four drachms will be taken by each leech, including the quantity which afterwards escapes from the orifice. In the progress of the complaint, leeches may be applied to the labia, or even within the vestibulum, by means of which, more relief is sometimes

obtained than by their application to the pubis. It will not be sufficient to order local blood-letting once or twice, but it will be desirable to prescribe it once in three weeks or a month, provided the patient should not be much weakened by it, nor exhausted by pain, or by very profuse discharge.

In some instances, a profuse spontaneous bleeding has arisen from some vessel exposed by the ulceration, to the extent of producing syncope; the result of such a circumstance is frequently found to be favourable to the patient, the progress of the symptoms being thereby, for the time, arrested. Even in the latter stages of the disease, when the loss of blood could hardly be considered to be warranted, it may, nevertheless, be proper to recommend it. It is a well known fact that carcinoma of the uterus involves, in its ulcerated stage, all the parts in its neighbourhood; but the author is not aware, that the manner in which this communication is made has been described by other writers. When

the process of ulceration is simply confined to the uterus, and cellular membrane surrounding it, the symptoms proceed with a degree of regularity and uniformity; but when a new organ is attacked, new symptoms arise, appertaining to, and characteristic of, inflammation in such organ. For instance, when the rectum is attacked, there is tenesmus, great heat in that part, increased distress on voiding the fæces, exquisite tenderness of the gut if the finger be carried into it. So, in like manner, if the disease proceeds to the bladder, shivering usually comes on, succeeded by heat, great pain, which is fixed and constant, together with strangury: if the disease makes its way, which, however, is not very common, into the cavity of the abdomen, symptoms of peritoneal inflammation will present themselves; such as tenderness of the belly, distension of its cavity, and a small frequent pulse. Now, if these symptoms are allowed to proceed, the patient will die, as she would do if attacked by acute inflammation of the bladder, or of the peritoneum. Thus the

presence of these symptoms, even in a late period of the disease, may call for the loss of blood, although, under any other circumstances, it would be improper to direct such a remedy.

The management of the discharge from carcinomatous sores is a circumstance deserving the best attention of the surgeon. This discharge appears to have the power of converting the neighbouring parts to which it is applied, in some instances, into sores of a similar character to that by which it was itself secreted; and there is reason to believe that the spreading of carcinomatous ulceration may be greatly retarded by the employment of those means which absorb or remove the ichorous fluid secreted by them. Common aphthous sores, which frequently arise in the vestibulum of women who have long laboured under diseases of the female organs, may also possibly be converted into malignant ulcerations. These observations especially apply to carcinomatous ulcerations of internal parts, in which the discharges are more likely to be

retained than where the disease attacks external surfaces. If it were only that the foetor attending such sores would be removed by cleanliness, attention to this circumstance would be of great consequence, inasmuch as the patient's health, and that of such persons as may associate with her, will be less likely to suffer than when constantly breathing an impure atmosphere.

Of all the modes of applying water to sores at the upper part of the vagina, none is so effectual as the use of the hip bath ; in the employment of which, the water is brought into contact with the sore without any risk of injuring the latter. By these means, the object of maintaining cleanliness is not only obtained, but a soothing application is made to an irritable surface ; the careful injection of warm water into the vagina, by a syringe, or the agitation of the water by the hand, whilst in the bath, will render it more likely to remove any portions of coagulating lymph or thickened matter which may adhere to the inside of the vagina. The heat of the water employed should



depend upon the feelings of the patient in some measure ; but, generally speaking, it may vary from about  $86^{\circ}$  to  $94^{\circ}$ . Where the patient is too weak to bear the exertion of being placed in a hip bath, her hips may be brought over the edge of the bed, and warm water may be carefully injected into the vagina by a female syringe. The quantity of the discharge is frequently increased by the means above mentioned, but the comfort which the patient will derive from it, will abundantly compensate her for any debility which may be produced by the remedy ; and excruciating attacks of pain are sometimes rendered very sufferable by a frequent recurrence to it. Strong decoction of carrots, sometimes used for the same purpose, has the happiest effects. Warm water may also be made the vehicle for a variety of sedative applications, which are found by experience to tranquillize all irritable sores ; and, in some, to expedite the healing process. Amongst the different applications for this purpose, the *extractum conii*, or *extractum hyoscyami*, may be mentioned, either of which may be em-

ployed in the proportion of about three or four drachms to a pint of water. Solutions of opium, or of extract of poppy, may also be used ; of the former, two drachms ; of the latter, half an ounce, may be dissolved in each pint of water. Starch, or mucilage of quince-seed, form good menstrua for these applications ; their adhesive property enabling them to cling to surfaces to which they are applied. Three or four ounces of either of these fluids, impregnated with sedative substances, may be thrown into the rectum in those cases where relief is not obtained by their application to the vagina ; but when opium is used for this purpose, the practitioner should be very careful to watch over its effects, as it has sometimes happened that unpleasant consequences have arisen from the application of this drug to the rectum, such as, vomiting, syncope, cold extremities, and irregularity of the circulation. The action of the absorbents of the rectum is, in all probability, in these cases, increased by the inflammatory process which exists in the vicinity ; besides which, the action of the

rectum itself is temporarily taken off, so that the enema will probably be retained during a considerable length of time. Plasters and liniments, into the composition of which opium enters largely, will sometimes be found serviceable in allaying pain, and are useful auxiliaries in a disease in which all the resources of the practitioner may be required to diminish the sufferings of the patient.

There are some applications which produce a sedative, or a stimulating effect, according to the strength of which they are used. A very diluted mixture of acetic acid or of nitric acid in water, will form a soothing application to an irritable part, whilst in different proportions they will become highly irritating. Either of the lotions mentioned beneath may be employed.

R    *Acidi acetici*,  $\bar{z}$  ss.  
      *Aquæ distillatæ*, Oi.    M.  
fiat injectio.

R    Acidi nitrici, gutt. x.  
      Aquæ distillatæ, Oi.    M.  
fiat injectio.

R    Liquoris plumbi acetatis, ʒ i.  
      Acidi acetici, ʒ ii.  
      Sp. vinosi, ʒ i.  
      Aquæ distillatæ, ʒ xvss.    M.  
fiat injectio.

If the discharge should become so profuse as to induce great debility, injections which possess an astringent power must be sought for.

R    Decocti corticis granati, Oi.  
      Sulphatis aluminæ, ʒ ss.    M.  
fiat injectio.

R    Zinci sulphatis, ʒ ss.  
      Aquæ distillatæ, ʒ xv.  
      Tinct. kino, ʒ i.    M.  
fiat injectio.

If the discharge should assume a sanguineous appearance, it should be con-

sidered, how far it would be safe to permit its continuance. If the patient should be in great pain at the time, it may be right not to restrain it hastily, unless the patient's strength should have been previously much exhausted; but if it should appear desirable to diminish the hemorrhage, the astringents which have been before recommended may be employed, and their strength may be increased; or the following may be employed in their stead.

R    Argenti nitratis, gr. x.  
      Aquæ distillatæ, Oi.        M.

R    Cupri sulphatis, 3 ss.  
      Decocti cinchonæ, Oi.       M.

Respecting internal remedies, although no one has as yet discovered any medicine capable of removing the disease, it may not be too much to state, that there is scarcely a medicine of any class, which may not in some way or other, or at some period or other, be useful in this complaint. Various are the symp-



toms which may arise; various must be the means of obviating them; and he will be the best practitioner, who best understands the adaptation of these means to their end. To point them out here, would be an endless labour, and a waste of the reader's time.

It may be sufficient to observe, that the patient should be treated upon general principles, bearing in mind on the one hand, the hitherto intractable nature of the malady, and on the other, the sufferings of humanity, which call loudly for relief.

Pain, the great evil of life, is the symptom by which the patient will be most distressed; and, happily, in the sedative class of medicines there are to be found many capable of relieving it.

It should be a rule of practice never to exhibit a sedative of great power, when a milder will produce equal relief; because the disease is one of long duration, of in-

creasing suffering, and every medicine will at length fail in producing its effect.

Hyoscyamus and conium may be amongst the first employed, and the dose of each may vary from three to eight, or ten grains ; larger doses have been exhibited ; but the object is not to know how much of these, or of any other drug, can be taken with impunity, but how much is necessary to produce the desired effect. If they are wantonly employed, the patient will be exposed to another set of symptoms, arising from a disturbed state of the stomach, and of the brain, as flatulence, heartburn, eructations, blindness, delirium : the necessity for the exhibition of these medicines must regulate, not only their dose, but the frequency of their exhibition.

Extractum stramonii is another serviceable remedy, in allaying pain, and it may be given in doses of a grain.

The writer is not in the habit of exhibiting Belladonna, having once seen a patient

nearly destroyed by two small doses of it, and alarming effects have followed its use in other cases, so that it must be regarded as a dangerous remedy; at all events it should be given in very small doses, the effects of which should be most carefully watched. Other practitioners, however, have employed it, it is said, with advantage. Mr. Brodie, has informed the writer, that he has seen the happiest effects produced by a suppository containing extracti Belladonnæ gr. j. in cases of irritable bladder, and also of carcinoma of the rectum. Perhaps, therefore, in those instances, in which the administration of other sedatives is unavailing, it may be advisable to administer the above medicine in the form alluded to.

As the symptoms become more pressing, and, as the sufferings of the patient increase, still there will remain to the practitioner one resource, and to the patient one solace, in opium, by means of which, the distresses of the former may be alleviated, and her passage from this world to another rendered less agonizing. It will not be sufficient simply

to prescribe a dose of opium, at stated intervals ; that dose must be proportioned to the necessity for its use ; and the skilful combination of it with other medicines, and the selection of its different preparations, will call forth the happiest efforts of the practitioner : in one case opium, in a solid form, will be found to agree ; in another, the *tinctura opii*, of the *Pharmacœpia*, will better answer the purpose ; in a third, the preparation known by the name of black drop ; in a fourth, the *liquor opii sedativus*, of Mr. Battley, will quiet the patient, and at the same time produce the least disturbance in the system ; whilst the irritable state into which some patients fall will be most successfully diminished by the very small quantity of opium which enters into the composition of the *tinctura camphoræ composita*.

In the greater number of painful diseases which call for the use of opium, less care is required ; but the sympathy of the stomach is so actively called forth, when the uterus is the seat of this disease, that

it will be capriciously inclined towards one medicine, whilst it receives another with great comfort and advantage. If, as always happens towards the close of ulcerated carcinoma of the uterus, vomiting should come on, the combination of spices, with opium, will render this medicine more agreeable to the stomach. The *julepum menthæ*, cinnamon-water, and, in some cases, weak brandy and water, will form the best vehicles for the different preparations of opium ; sometimes a mixture of *confectio opiata* and *spiritus ætheris sulphurici compositus*, given in peppermint-water, in small doses at short intervals, will relieve, in an expeditious and certain manner, the vomiting, singultus, and eructations, more effectually than any other combinations of medicines.

The writer forbears to enter into speculative discussions, respecting the employment of several medicines which have been suggested for the cure of carcinoma ; and he does so, because the profession have not yet had sufficient experience of the



effect of such medicines ; or, because he himself has not known them used with benefit.

In thus concluding his work, the writer can conscientiously assert, that he has made no statements which, in his opinion, are not founded in fact ; and that he has withheld nothing which might in any way tend to the advantage of the practitioner, or to the comfort of the patient.

THE END.





## EXPLANATION OF THE PLATES.

---

### PLATE I.

THIS plate shows a portion of hydatids of the uterus. The quantity voided by the patient would have filled a gallon measure. The preparation is suspended in the spirit by a portion of organized coagulating lymph, from which the hydatids spring, being connected with it by means of small filaments of the same substance. The cysts vary in size; some of them contain a fluid, whilst others have collapsed in consequence of its escape.

## PLATE II.

In this plate are two figures of the cauliflower excrescence of the uterus.

*Fig. 1.* Conveys an exceedingly good idea of the disease, as met with in the living body, the surface being studded with a number of little granules heaped upon each other, forming masses of an irregular shape. The lines drawn from letters A. and B. terminate in different parts of the mass. The letter A. in a portion which has a granulated appearance; the letter B. in a small flocculent portion, which, having lost the blood originally contained in it, forms a fine light substance, which floats in the spirit.

*Fig. 2.* Shows the uterus of a patient who died of the cauliflower excrescence. The preparation is suspended by the Fallopian tubes.

A. Points to the loose flocculent substance always found after death in patients who



FIG. I.



FIG. II.





- ( have laboured under the disease. During life the flocculent substances, being vascular, are filled with blood, and a solid mass is thereby formed ; but these small vessels emptying themselves, nothing remains but their coats, which are seen lightly floating in the spirit in which the preparation is placed.
- B. Shows a part of the os uteri which remains perfectly healthy. Perhaps this part may be about two fifths of its whole circumference.
- C. C. The ovaria.
- D. An incision made through the parietes of the uterus, which are somewhat thickened.

## PLATE III.

A preparation of the corroding ulcer of the  
os uteri.

A. Shows the ulceration. A piece of quill is placed so as to bring the whole surface into view. It will be observed that the os uteri is entirely destroyed by the ulcerative process, but there is not the smallest thickening of the circumjacent parts.

B. Shows the vagina in a healthy state.

C. A small cyst in the broad ligaments, containing pus.



*Drawn by John Stewart Junr*

*Engraved by J. Murray*









*Drawn by John Sawers Junr*

*Engraved by J. Sturge*

*London. Published by Longman & Co. Paternoster Row. April 13. 1821.*

## PLATE IV.

## Ulcerated carcinoma of the uterus.

This plate, when contrasted with the former, shows the uterus altogether much thickened, the cervix of the uterus especially.

Two lines meet at A.; these diverging, lead to the upper and lower, or rather to the anterior and posterior parts of the cervix uteri. All traces of the os uteri are destroyed.

The points particularly deserving of notice in these plates are, ulceration without thickening in the corroding ulcer, and ulceration with great thickening in carcinoma.

B. The Fallopian tube.

LONDON:  
Printed by A. & R. Spottiswoode,  
New-Street-Square.











